



A Wausau-Mosinee Company

US EPA RECORDS CENTER REGION 5



936589

7 March 2001

Ms Ruth McNamara
Office of Chemical Emergency Preparedness
and Prevention
U S Environmental Protection Agency
77 West Jackson Boulevard (SC-6J)
Chicago, Illinois 60604

Dear Ms McNamara,

As per your E-mail to me dated 7 March 2001, concerning the "Request for Information Regarding EPCRA Sections 311 and 312," I have enclosed a copy of my E-mail to you explaining the facility name change I have also enclosed the INVENTORY FEE STATEMENT forms and the WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY reports for the report years of 1997, 1998, and 1999

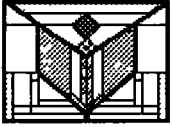
Please let me know if you need any additional information

Sincerely,
Wausau-Mosinee Paper Corporation

Robert P Klenner
Environmental Manager

Encl

CC C Kurtenbach
R Ostromecki



Bob Klenner

03/07/2001 09:13 AM

To: mcnamara.ruth@epa.gov
cc: Cara Kurtenbach/Brokaw/PrtWrt/WMP@WausauMosineePapers, Ron Ostromecki/Brokaw/PrtWrt/WMP@WausauMosineePapers
cc: Cara Kurtenbach/Brokaw/PrtWrt/WMP@WausauMosineePapers, Ron Ostromecki/Brokaw/PrtWrt/WMP@WausauMosineePapers
Subject: REQUEST FOR INFORMATION REGARDING EPCRA SECTION 311 & 3112

Ms. Ruth McNamara
Office of Chemical Emergency Preparedness and Prevention
U.S. Environmental Protection Agency
Chicago, IL 60604

RE: Request for Information Regarding EPCRA Sections 311 and 312
Wausau-Mosinee paper Corp., 1 Quality Way, Brokaw, WI 54417

Dear Ms. McNamara;

I received the above referenced Request for Information. I am hoping to save us both some time and effort. I believe the misunderstanding can be explained very simply. The Tier II Reports for the 1997 reporting year were provided to the State of Wisconsin SERB, the LEPC, and local FD as prescribed by regulation. The preprinted Tier II Reports from the State of Wisconsin listed the facility's name, mailing address, and owner as WAUSAU PAPER MILLS COMPANY. This was in fact the case for most of the year 1997. In December of 1997, the WAUSAU PAPER MILLS COMPANY merged with the MOSINEE PAPER COMPANY to form the WAUSAU-MOSINEE PAPER CORPORATION.

On both the 1998 INVENTORY FEE STATEMENT (for report year 1997) and the WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY forms, notations were made requesting that the State change the facility name, the mailing address, and the owner to "WAUSAU-MOSINEE PAPER CORPORATION." These corrections were made on the preprinted forms that were supplied by the State of Wisconsin for Report Year 1998.

It is my belief that the State of Wisconsin SERB will have a record for a Tier II submittal by WAUSAU PAPER MILLS COMPANY for the report year 1997. This facility has been subject to the EPCRA regulations since they were promulgated in 1986. The facility has filed the appropriate Tier II reports every year since report year 1987.

Please let me know if this explanation is satisfactory. I would be happy to provide you with the copies of the Fee Statement and Tier II forms for the 1997 Report Year. I can be reached at bklenner@wausaumosinee.com or by telephone at 715-675-9891 extension 5450#.

Thank you very much.

Robert P. Klenner
Environmental Manager, Brokaw Mill
Wausau-Mosinee Paper Corporation



bklenner@wausaumosinee.com on 03/07/2001 09:13:10 AM

To RUTH MCNAMARA cc ckurtenb, rostrom
Subject REQUEST FOR INFORMATION REGARDING EPCRA SECTION 311 & 3112

Ms. Ruth McNamara
Office of Chemical Emergency Preparedness and Prevention
U.S. Environmental Protection Agency
Chicago, IL 60604

RE: Request for Information Regarding EPCRA Sections 311 and 312
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Thank you very much.

Robert P. Klenner
Environmental Manager, Brokaw Mill
Wausau-Mosinee Paper Corporation

7000 0520 0014 6157 0048



P.O. BOX 305
BROKAW, WISCONSIN 54417-0305

Ruth McNamara
Office of Chemical Emergency
Preparedness & Prevention
U.S. Envir. Protection Agency
77 West Jackson Blvd. (SC-6J)
Chicago, IL 60604

REPORT YEAR 1997

STATE EMERGENCY RESPONSE BOARD
DMA 1004 (R12-96) Wis. Stat. 166.20-21

1998 INVENTORY FEE STATEMENT

(For Chemicals Present During Calendar Year 1997)

WAUSAU PAPER MILLS COMPANY

001263-7

Information as it appeared last year:

Please make corrections in the boxes below:

1. This site has been assigned as its S.E.R.B.
facility identification number: **001263-7**

2. The owner's Federal Employee Identification
Number is:

390690900

3. The facility's name and physical location is:
WAUSAU PAPER MILLS COMPANY

2ND STREET

BROKAW, WI 54417

Municipal code **37-106**

in the ☐ City ☐ Town ☒ Village ☐ Tribal

of **BROKAW**

in the county of **Marathon**

4. The mailing address for this facility is:
WAUSAU PAPER MILLS COMPANY

P.O. BOX 305

BROKAW, WI 54417

Attn: **DARRELL W. JEFFRIES**

5. Correspondence for this facility should be mailed
to the owner?

☒ YES

☐ NO

6. The owner of this facility is:
WAUSAU PAPER MILLS COMPANY

P.O. BOX 305

BROKAW, WI 54417

Attn: ***FACILITY OWNER/OPERATOR***

7. The Standard Industrial Classification
(SIC) Code for this facility is: **2621**

**8. THIS FACILITY HAS HAZARDOUS CHEMICALS PRESENT IN REPORTABLE AMOUNTS AND IS
REQUIRED TO FILE A TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY REPORT (SEE
INSTRUCTIONS).**

☒ YES

☐ NO

(CONTINUED ON NEXT PAGE -- COMPLETION OF CERTIFICATION WITH SIGNATURE IS REQUIRED)

1998 INVENTORY FEE STATEMENT

(For Chemicals Present During Calendar Year 1997)

STATE EMERGENCY RESPONSE BOARD
DMA 1004 (R12-96) Wis. Stat. 166.20-21

WAUSAU PAPER MILLS COMPANY

9. If the answer to question 8 was 'NO', check the appropriate exemption(s) below which apply to this facility. If the answer was 'YES', skip this item.

- ☐ (a) This facility is not covered by the OSHA Hazard Communication Act and is not a private or public agency as defined by s. 166.20 (1)(h) and (i). (See Instructions)
- ☐ (b) This facility did not have present at any time last year any hazardous chemicals at or above 10,000 pounds. Also, it did not have any extremely hazardous substances at or above 500 pounds or the designated threshold planning quantity, if lower than 500 pounds. I understand that if the situation changes, it is the facility's responsibility to notify the SERB. (See Instructions)
- ☐ (c) Per OSHA Hazard Communication Act regulations, hazardous chemicals present at this facility are not required to have Material Safety Data Sheets prepared for them or available at the facility because of CFR Chapter 29, Section 1910.1200(b) exemption(s). (see Instructions)
- ☐ (d) Hazardous substances at this facility are exempt from Tier Two reporting because of one or more of the Section 311(e) exemptions. (see Instructions)

10. This facility IS required to file a Tier Two report but is FULLY exempt from paying ANY annual Inventory fees. If the answer to this question is 'YES', check the appropriate fee exemption(s) below. If 'NO', skip.

Change to

☒ No ☐ Yes

- ☐ (a) This is a petroleum marketing facility with reportable amounts of gasoline and/or diesel fuel present, held for resale or retail which is exempt from Inventory Fee calculation (see instructions for definition of a petroleum marketing facility) and there are no other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.
- ☐ (b) This facility has reportable amounts of sand and/or gravel present which are exempt from Inventory Fee calculation and there are no other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.
- ☐ (c) The operator of this facility had fewer than 10 full-time employees (20,000 hrs.) in the state of Wisconsin in 1996. There were a total of _____ (indicate the number) full-time equivalent employees.
- ☐ (d) This facility has reportable amounts of calcium chloride, sodium chloride and calcium magnesium acetate present, used as a road de-icing agent which is exempt from Inventory Fee calculation and there are no other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.

11. This facility is required to file a Tier Two report but is claiming a PARTIAL exemption from the fees because SOME of the reportable substances present are fee exempt as follows: If the answer to this question is 'YES', check the appropriate fee exemption(s) below. If 'NO', skip.

Change to

☒ No ☐ Yes

- ☐ (a) This is a petroleum marketing facility with reportable amounts of gasoline and/or diesel fuel present, held for resale or retail which is exempt from Inventory Fee calculation (see instructions for definition of a petroleum marketing facility) and there are other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.
- ☐ (b) This facility has reportable amounts of sand and/or gravel present which are exempt from Inventory Fee calculation and there are other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.
- ☐ (c) This facility has reportable amounts of calcium chloride, sodium chloride and calcium magnesium acetate present, used as a road de-icing agent which is exempt from Inventory Fee calculation and there are other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.

12. FEE DETERMINATION

a. Total chemicals reported in 1997 (for chemicals present during calendar year 1996)

a. # of chemicals listed on Tier Two

b. Number of chemicals that are fee exempt:

b.

c. Number of chemicals that are NOT fee exempt (line a - b):

c.

d. Was the total weight of non-fee-exempt chemicals over 100,000 pounds?

d. ☒ Yes ☐ No

e. Fee Owed: (See schedule to determine fee.)

e. Please enter on line 1 of the fee remittance.

f. Late payment surcharge:

f. Please enter on line 2 of the fee remittance.

a) Fee paid on time, enter 0

b) Fee paid late enter 20% of amount on line e.

g. TOTAL FEES REMITTED (Add lines e and f.)

g. Please enter on line 3 of the fee remittance.

13. CERTIFICATION (Signature and date required):

I, as the owner/operator OR owner/operator's authorized representative, have reviewed this Fee Statement and certify that the information submitted is true, accurate and complete.

Printed Name: Darrell W Jeffries

Official Title:

Mgr Env Oper & Reg Affairs

Telephone Number: 715-625-3361

Signature:

Darrell W Jeffries

Date Signed

2/23/98

DMA 1005 (R12-96) Wis. State 166.20

For use in reporting chemicals present during 1997. (DUE MARCH 1, 1998)

Page 1

Facility Location:		Owner/Operator:		SERB Facility ID:	
Name:	WAUSAU PAPER MILLS COMPANY	Name:	WAUSAU PAPER MILLS COMPANY	12637	
Change to:	Wausau-Mosinee Paper Corporation	Change to:	Wausau-Mosinee Paper Corporation	001263-7	
Address:	2ND STREET	Address:	P.O. BOX 305	FEIN #:	390690900
Change to:		Change to:		Change to:	
City, State:	BROKAW, WI 54417	City, State:	BROKAW, WI 54417	SIC Code:	2621
Change to:		Change to:		Change to:	

Emergency Contacts:	First:	DARRELL W JEFFRIES	Phone 1:	715-675-3361	24 hr Phone:	Not responsive
	Change to:	<i>Kirk Ermatinger</i>	Phone 1:		24 hr Phone:	Not responsive
	Second:	RONALD R OSTROMECKI	Phone 1:	7156753361	24 hr Phone:	Not responsive
	Change to:		Phone 1:		24 hr Phone:	

Gas Number:		Trade Secret	Pure	Mix	Solid	Liquid	Gas	EHS	7664417
007664-41-7	Current:	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	
<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/> Check here to delete this chemical

Chemical name: AQUA AMMONIA

EHS Name: AMMONIA

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current:	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to:	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See Instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount	
05	04	365	1,463,000	pounds
			124,300	<input checked="" type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See Instructions)

Cont.:	Pres.:	Temp.:	Storage locations
A <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	AQUA AMMONIA TANK MAIN ENTRANCE & CHEMICAL STORAGE AREA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Change location to (do not exceed space provided): **Confidential:**

I certify under penalty of law that I have personally examined and am familiar with information submitted in pages 1 through 6 in addition to all attached documents, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

REQUIRED ATTACHMENT: ☒ I have attached a site plan.

Optional Attachments: ☐ I have attached a description of dikes and other safeguard measures.

2/23/98 ☐ I have attached a list of site coordinate abbreviations.

Date signed

Darrell W Jeffries Mgr Env Oper & Reg Affairs
Name and official title of owner/operator OR owner/operator's authorized representative

Signature Donald E. Klein Date signed 2/23/98

Please return to: STATE EMERGENCY RESPONSE BOARD Facility Reporting Section P.O. Box 7978 Madison, Wisconsin 53707-7978 (608) 242-3221
Send copies to county Local Emergency Planning Committee and local Fire Department

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-96) Wis. State 166.20

For use in reporting chemicals present during 1997. (DUE MARCH 1, 1998)

Page 2

Facility Location:

Name: **WAUSAU PAPER MILLS COMPANY**

Owner/Operator:

Name: **WAUSAU PAPER MILLS COMPANY**

SERB Facility ID:

001263-7

12637

Chemical Description

Cas Number:

007664-93-9

Current:

Change to:

Trade Secret

No ☒

Yes ☐

Pure

Yes ☒

No ☐

Mix

Yes ☒

No ☐

Solid

No ☒

Yes ☐

Liquid

Yes ☒

No ☐

Gas

No ☒

Yes ☐

EHS

Yes ☒

No ☐

7664939

☐ Check here to delete this chemical

Chemical name: **SULFURIC ACID**

EHS Name: **SULFURIC ACID**

Physical and Health Hazards

Fire	Pressure	Reactivity	Immediate	Delayed
No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to: Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See Instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
05	05	365	173,300 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<u>153,000</u> pounds <input checked="" type="checkbox"/> gallons

Storage Codes and Locations (See Instructions)

Cont.:	Pres.:	Temp.:	Storage locations
A <input type="checkbox"/>	4 <input type="checkbox"/>	1 <input type="checkbox"/>	SULFURIC ACID TANK BACK SIDE OF MILL HAS SECONDARY CONTAINMENT 55 GAL
D <input type="checkbox"/>	4 <input type="checkbox"/>	1 <input type="checkbox"/>	AREA BLDG 39 ALUM STORAGE TANK BLDG 3 BLDG #24 HAS BULK STORAGE

Change location to (do not exceed space provided):

Confidential:

Chemical Description

Cas Number:

007782-50-5

Current:

Change to:

Trade Secret

No ☒

Yes ☐

Pure

Yes ☒

No ☐

Mix

No ☒

Yes ☐

Solid

Yes ☒

No ☒

Liquid

No ☒

Yes ☒

Gas

Yes ☒

No ☐

EHS

Yes ☒

No ☐

7782505

☐ Check here to delete this chemical

Chemical name: **CHLORINE**

EHS Name: **CHLORINE**

Physical and Health Hazards

Fire	Pressure	Reactivity	Immediate	Delayed
No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to: Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See Instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
05	05	365	660,000 pounds
<u>06</u>	<input type="text"/>	<input type="text"/>	<u>1,350,000</u> pounds <input checked="" type="checkbox"/> gallons

Storage Codes and Locations (See Instructions)

Cont.:	Pres.:	Temp.:	Storage locations
O <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	2 <input checked="" type="checkbox"/>	RAIL YARD CHLORINE
L <input type="checkbox"/>	4 <input checked="" type="checkbox"/>	2 <input checked="" type="checkbox"/>	UNLOADING AREA ONE TON CYLINDERS WASTEWATER PLANT

Change location to (do not exceed space provided):

Confidential:

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-96) Wis. State 166.20

For use in reporting chemicals present during 1997. (DUE MARCH 1, 1998)

Page 3

Facility Location:

Name: WAUSAU PAPER MILLS COMPANY

Owner/Operator:

Name: WAUSAU PAPER MILLS COMPANY

SERB Facility ID:

001263-7

12637

Chemical Description

Cas Number: 000766-43-8	Current:	Trade Secret No <input checked="" type="checkbox"/>	Pure No <input checked="" type="checkbox"/>	Mix Yes <input checked="" type="checkbox"/>	Solid No <input checked="" type="checkbox"/>	Liquid Yes <input checked="" type="checkbox"/>	Gas No <input checked="" type="checkbox"/>	EHS No <input checked="" type="checkbox"/>	766438
Change to:		Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	

☐ Check here to delete this chemical

Chemical name: PHOSPHORIC ACID

EHS Name: (none)

Physical and Health Hazards

Current:	Fire No <input checked="" type="checkbox"/>	Pressure No <input checked="" type="checkbox"/>	Reactivity Yes <input checked="" type="checkbox"/>	Immediate Yes <input checked="" type="checkbox"/>	Delayed No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See Instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
03	02	365	48,572 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See Instructions)

Cont.: Pres.: Temp.: Storage locations
 C ☐ 4 ☐ 1 ☐ 4 TANK AT WASTEWATER TREATMENT PLANT

Change location to (do not exceed space provided): Confidential:

Chemical Description

Cas Number: 007681-52-9	Current:	Trade Secret No <input checked="" type="checkbox"/>	Pure No <input checked="" type="checkbox"/>	Mix Yes <input checked="" type="checkbox"/>	Solid No <input checked="" type="checkbox"/>	Liquid Yes <input checked="" type="checkbox"/>	Gas No <input checked="" type="checkbox"/>	EHS No <input checked="" type="checkbox"/>	7681529
Change to:		Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	

☐ Check here to delete this chemical

Chemical name: SODIUM HYPOCHLORITE

EHS Name: (none)

Physical and Health Hazards

Current:	Fire No <input checked="" type="checkbox"/>	Pressure No <input checked="" type="checkbox"/>	Reactivity Yes <input checked="" type="checkbox"/>	Immediate Yes <input checked="" type="checkbox"/>	Delayed No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See Instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	04	365	45,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See Instructions)

Cont.: Pres.: Temp.: Storage locations
 C ☐ 1 ☐ 4 THE TANKS IN BLDG 14

Change location to (do not exceed space provided): Confidential:

Page 4

001263-7

☐ Check here to delete this chemical☐ **Check here to delete this chemical**

Confidential:

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-96) Wis. State 166.20

For use in reporting chemicals present during 1997. (DUE MARCH 1, 1998)

Page 5

Facility Location:

Name: **WAUSAU PAPER MILLS COMPANY**
 A ☐ 5 ☐ 1 ☐ OUTSIDE STORAGE TANK
 Q ☐ 4 ☐ 1 ☐ RAIL CARS
☐ ☐ ☐

Owner/Operator:

Name: **WAUSAU PAPER MILLS COMPANY**

SERB Facility ID:

12637

001263-7

Chemical Description

Cas Number: **000130-57-8** Trade Secret ☐ Pure ☒ Mix ☒ Solid ☒ Liquid ☒ Gas ☒ EHS ☒ 130578
 Current: No ☒ Yes ☒ No ☒ Yes ☒ No ☒ Yes ☒ No ☒ Yes ☒
 Change to: Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐

☐ Check here to delete this chemical

Chemical name: **CALCIUM OXIDE**

EHS Name: **(none)**

Physical and Health Hazards

Current: Fire ☒ Pressure ☒ Reactivity ☒ Immediate ☒ Delayed ☒
 Change to: No ☐ No ☐ Yes ☐ No ☐ No ☐

Inventory (See Instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
05	04	365	96,934 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	102,000 <input checked="" type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See Instructions)

Cont.: Pres.: Temp.: Storage locations
 H ☐ 4 ☐ 1 ☐ OUTSIDE STORAGE SILO
☐ ☐ ☐

Change location to (do not exceed space provided): Confidential: ☐

Chemical Description

Cas Number: **000778-24-4** Trade Secret ☐ Pure ☒ Mix ☒ Solid ☒ Liquid ☒ Gas ☒ EHS ☒ 778244
 Current: No ☒ Yes ☒ No ☒ Yes ☒ No ☒ Yes ☒ No ☒ Yes ☒
 Change to: Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐

☐ Check here to delete this chemical

Chemical name: **OXYGEN**

EHS Name: **(none)**

Physical and Health Hazards

Current: Fire ☒ Pressure ☒ Reactivity ☒ Immediate ☒ Delayed ☒
 Change to: No ☐ Yes ☐ No ☐ Yes ☐ No ☐

Inventory (See Instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
03	03	365	955,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	935,000 <input checked="" type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See Instructions)

Cont.: Pres.: Temp.: Storage locations
 A ☐ 7 ☒ 2 ☒ OUTSIDE STORAGE TANK
☐ ☐ ☐

Change location to (do not exceed space provided): Confidential: ☐

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-96) Wis. State 166.20

For use in reporting chemicals present during 1997. (DUE MARCH 1, 1998)

Page 6

Facility Location:

Name: **WAUSAU PAPER MILLS COMPANY**

Owner/Operator:

Name: **WAUSAU PAPER MILLS COMPANY**

SERB Facility ID:

12637

001263-7

Chemical Description

Gas Number:

000744-05-0

Current:

Trade Secret

No ☒

Pure

No ☒

Mix

Yes ☒

Solid

No ☒

Liquid

Yes ☒

Gas

No ☒

EHS

No ☒

744050

Change to:

Yes ☐

Yes ☐

No ☐

Yes ☐

No ☐

Yes ☐

Yes ☐

☐ Check here to delete this chemical

Chemical name: **COPPER**

EHS Name: **(none)**

Physical and Health Hazards

Current:	Fire No <input checked="" type="checkbox"/>	Pressure No <input checked="" type="checkbox"/>	Reactivity No <input checked="" type="checkbox"/>	Immediate Yes <input checked="" type="checkbox"/>	Delayed No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See Instructions)

Max.Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04 03	04 02	055 365	10,500 pounds 1,500 <input checked="" type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See Instructions)

Cont.: Pres.: Temp.: Storage locations
C ☐ 1 ☐ 4 ☐ BEATER ROOM BLDG 39

Change location to (do not exceed space provided): Confidential:

Chemical Description

Gas Number:

(please enter)

Current:

Trade Secret

No ☒

Pure

No ☒

Mix

Yes ☒

Solid

No ☒

Liquid

Yes ☒

Gas

No ☒

EHS

No ☒

Change to:

Yes ☐

Yes ☐

No ☐

Yes ☐

No ☐

Yes ☐

Yes ☐

☐ Check here to delete this chemical

Chemical name: **#2 FUEL OIL**

EHS Name: **(none)**

Physical and Health Hazards

Current:	Fire Yes <input checked="" type="checkbox"/>	Pressure No <input checked="" type="checkbox"/>	Reactivity No <input checked="" type="checkbox"/>	Immediate No <input checked="" type="checkbox"/>	Delayed Yes <input checked="" type="checkbox"/>
Change to:	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

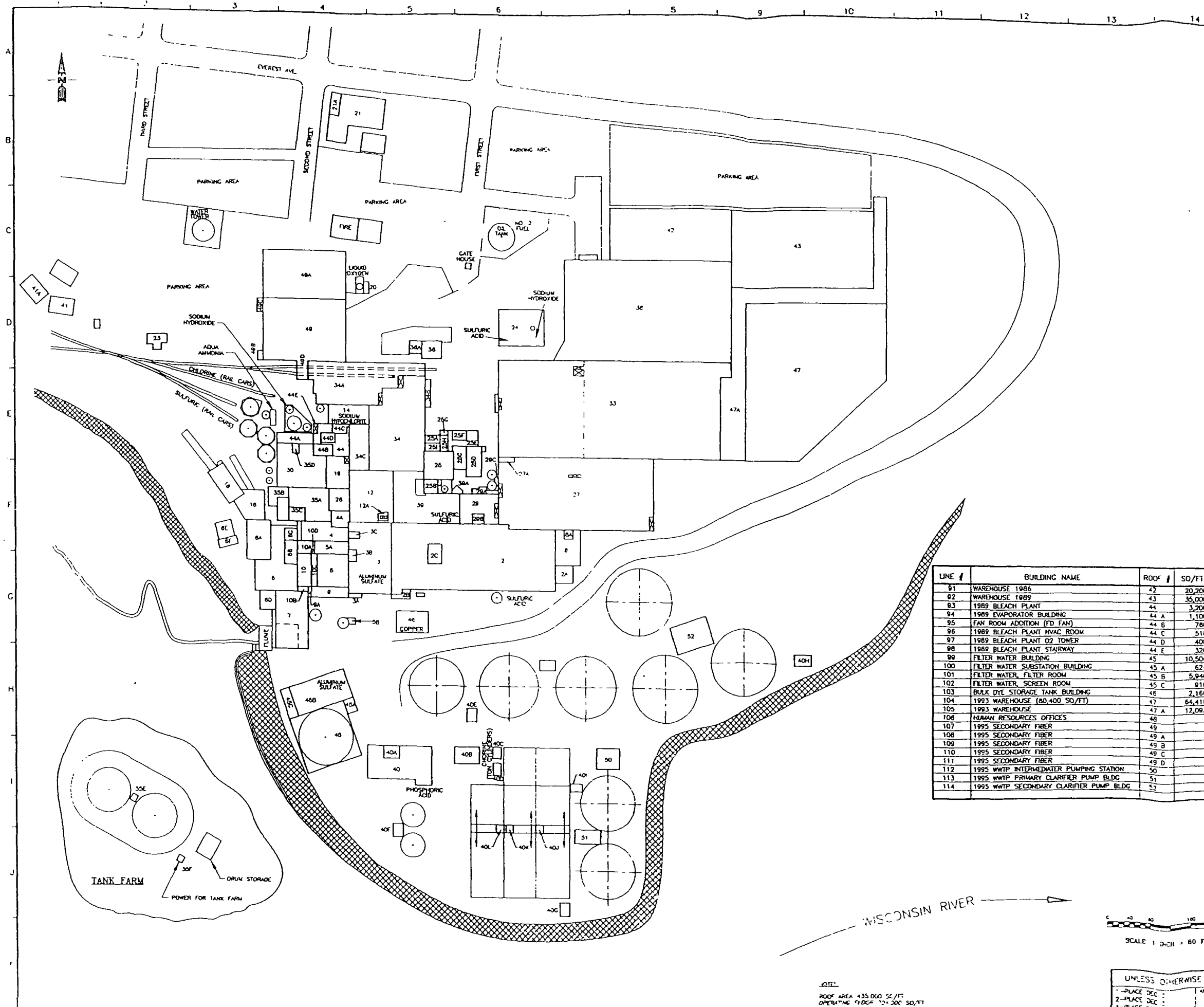
Inventory (See Instructions)

Max.Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
06 06	06 06	365 365	2,810,000 pounds 2,368,280 <input checked="" type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See Instructions)

Cont.: Pres.: Temp.: Storage locations
A ☐ 1 ☐ 4 ☐ NEXT TO BLDG 24

Change location to (do not exceed space provided): Confidential:



LINE #	BUILDING NAME	ROOF #	SO/FT
01	MACHINE ROOM BUILDING	2	34,400
02	MACHINE ROOM LOADING DOCK	2 A	1,089
03	MACHINE ROOM SUBSTATION NO. 10	2 B	
04	MACHINE ROOM PENTHOUSE MAKE-UP AIR UNIT	2 C	802
05	BEATER ROOM BUILDING	3	6,000
06	BEATER ROOM BLEZELWAY	3 A	
07	BEATER ROOM PENT HOUSE	3 B	
08	BEATER ROOM PENT HOUSE	3 C	
09	BOILER HOUSE NO. 1	4	5,700
10	SUBSTATION NO. 7	4 A	
11	SCREEN & DECKER ROOM	5	
12	SCREEN ROOM LOCKER ROOM	5 A	3,500
13	SCREENED SUPPLY CHEST PUMP HOUSE	5 B	
14	WOOD ROOM CHIPPER BUILDING	6	10,100
15	WOOD ROOM DEBARKING DRUM BUILDING	6 A	2,000
16	WOOD ROOM CHP SCREEN BUILDING	6 B	
17	WOOD ROOM	6 C	
18	SUBSTATION NO. 3	8 D	
19	WOOD ROOM CHP REJECT LOADING	6 E	
20	WOOD ROOM CHP REJECT	6 F	
21	WATER INTAKE BUILDING (PAINT SHOP)	7	7,000
22	MILL OFFICES (CASKEY, S&S, ETC.)	8	3,000
23	PENTHOUSE	8 A	
24	ENGINEERING OFFICES, SCREEN & H2O PUMP RM	9	1,400
25	ROOF SECTION	9 A	
26	DIGESTER BUILDING (NO. 1, 2 & 3 DIGESTERS)	10	2,500
27	DIGESTER BUILDING (NO. 4 DIGESTER)	10 A	
28	DIGESTER TESTING ROOM	10 B	
29	DIGESTER HEATER BUILDING	10 C	
30	DIGESTER STAIRWAY BUILDING	10 D	
31	OLD BLEACH PLANT (5X CAUSTIC TANKS)	12	10,000
32	OLD BLEACH PLANT (ELEVATOR) PENTHOUSE	12 A	288
33	BLEACH LIQUOR BUILDING	14	2,800
34	EAST SLASHER BUILDING	16	2,160
35	WEST SLASHER BUILDING	18	2,450
36	OLD BLEACH PLANT (HYPO TOWER)	19	2,520
37	GAS METERING HOUSE	20	1,860
38	MAIN OFFICES (PURCHASING)	21	
39	MAIN OFFICES (ENTRANCE)	21 A	
40	WOODLAND AND YARD OFFICE	23	1,250
41	BOILER HOUSE NO. 3	24	
42	BOILER HOUSE NO. 2	25	3,530
43	OLD COMPRESSOR BUILDING	25 A	560
44	FEED WATER BUILDING	25 B	480
45	BAW PACKAGE BOILER BUILDING	25 C	
46	EME BOILER BUILDING	25 D	
47	WICKES BOILER BUILDING	25 E	
48	ECONOMIZER BUILDING	25 F	
49	NO. 4 BOILER FD FAN	25 G	
50	CHEMICAL STORAGE BUILDING	25 H	
51	OLD COMPRESSOR BUILDING	25 I	
52	ACCUMULATOR BUILDING	28	1,880
53	CUTTER ROOM (RUMMERS & EXECUTIVE OFFICES)	27	35,250
54	CUTTER ROOM RESTROOM BUILDING	27 A	
55	R & D TECHNICAL LAB AND STARCH KITCHEN	29	4,400
56	BREEZEWAY	29 A	
57	PENTHOUSE - HVAC	29 B	
58	SILLO DUCT COLLECTION BUILDING	29 C	
59	FINISHING ROOM & MAINTENANCE SHOP	33	66,300
60	MATERIAL HANDLING BUILDING	34	14,830
61	MATERIAL HANDLING AND RECEIVING	34 A	8,840
62	MAINTENANCE OFFICES (O.D.)	34 B	1,080
63	HIGH DENSITY TOWERS	34 C	2,740
64	COPELAND REACTOR, EVAPORATOR BUILDING	35	7,700
65	FOREFRONT TOWER RECOVERY BOILER	35 A	4,100
66	150 LB. RECOVERY BOILER, COOLING VENTURE	35 B	
67	STACK MONITORING BUILDING	35 C	
68	PENTHOUSE TO CONDENSER	35 D	
69	TANK FARM MCC BLDG	35 E	140
70	TANK FARM PUMP BLDG	35 F	180
71	SWITCHGEAR BUILDING	36	1,600
72	SWITCHGEAR BUILDING	35 A	
73	WAREHOUSE 1989	38	54,400
74	MATERIAL STORAGE BUILDING	39	9,260
75	MATERIAL STORAGE LOADING DOOR	39 A	
76	WASTE WATER TREATMENT	40	10,360
77	WASTE WATER TREATMENT, PENTHOUSE	40 A	
78	WASTE WATER TREATMENT, BLOWER BUILDING	40 B	
79	WASTE WATER TREATMENT, CHLORINATION BLDG	40 C	
80	WASTE WATER TREATMENT, SLUDGE BUILDING	40 D	
81	WASTE WATER TREATMENT, MAINTENANCE SHOP	40 E	
82	SLUDGE THICKENER CONTROL BUILDING	40 F	
83	WASTE TREATMENT METERING BUILDING	40 G	
84	FINAL OUTFALL BUILDING	40 H	100
85	WASTE TREATMENT DIVERSION BUILDING	40 I	
86	SECONDARY CLARIFIER BRIDGE HOUSE EAST	40 J	
87	SECONDARY CLARIFIER BRIDGE HOUSE CENTER	40 K	
88	PRIMARY CLARIFIER BRIDGE HOUSE WEST	40 L	
89	GARAGE (COMPANY TRUCK)	41	2,170
90	1993 GARAGE	41 A	

LINE #	BUILDING NAME	ROOF #	SO/FT
91	WAREHOUSE 1986	42	20,200
92	WAREHOUSE 1989	43	35,000
93	1989 BLEACH PLANT	44	3,200
94	1989 EVAPORATOR BUILDING	44 A	1,100
95	FAN ROOM ADDITION (FD FAN)	44 B	780
96	1989 BLEACH PLANT HVAC ROOM	44 C	510
97	1989 BLEACH PLANT O2 TOWER	44 D	400
98	1989 BLEACH PLANT STAIRWAY	44 E	320
99	FILTER WATER BUILDING	45	10,508
100	FILTER WATER SUBSTATION BUILDING	45 A	624
101	FILTER WATER, FILTER ROOM	45 B	5,840
102	FILTER WATER, SCREEN ROOM	45 C	918
103	BULK DYE STORAGE TANK BUILDING	46	2,160
104	1993 WAREHOUSE (80,400 SO/FT)	47	84,418
105	1993 WAREHOUSE	47 A	12,082
106	HUMAN RESOURCES OFFICES	48	
107	1995 SECONDARY FIBER	49	
108	1995 SECONDARY FIBER	49 A	
109	1995 SECONDARY FIBER	49 B	
110	1995 SECONDARY FIBER	49 C	
111	1995 SECONDARY FIBER	49 D	
112	1995 WHPP INTERMEDIATE PUMP STATION	50	
113	1995 WHPP PRIMARY CLARIFIER PUMP BLDG	51	
114	1995 WHPP SECONDARY CLARIFIER PUMP BLDG	52	

3	02/26/96	DJ	ADDED BLDG #49, #50, #51 & #52
2	02/15/95	DJ	GENERAL UPDATE
1	02/12/94	JTI	GENERAL UPDATE & ADDED BLDG #2 & #4 & #47
REV	DATE	BY	DESCRIPTION
ENHANCE			
DESIGN	JTI		WAUSAU PAPER MILLS PLOT PLAN SAP# TITLE III
DRAWN	JTI		
CHECKED			
APPROVED			
SCALE	1" = 80'		
DATE	6-23-90		
UNLESS OTHERWISE SPECIFIED			
1-PLACE DEC			
2-PLACE DEC			
3-PLACE DEC			
4-PLACE DEC			
10329-D-17S			
17YARD/1100637			
WAUSAU PAPERS			
WAUSAU PAPER MILLS COMPANY			
01 OF 01			
REVISION			
3			

ROOF AREA 435,000 SQ/FT
OPERATING 1100637 12-300 SQ/FT

WISCONSIN RIVER

SCALE 1" = 80 FEET

REPORT YEAR 1998

1999 INVENTORY FEE STATEMENT

(For Chemicals Present During Calendar Year 1998)

WISCONSIN EMERGENCY MANAGEMENT
DMA 1004 (R12-98) Wis. Stat 166 20-21

WAUSAU-MOSINEE PAPER CORPORATION

001263-7

Information as it appeared last year:

Please make corrections in the boxes below:

1 This site has been assigned as its S.E.R.B.
facility Identification number: **001263-7**

2. The owner's Federal Employee Identification
Number is:

390690900

3 The facility's name and physical location is:
WAUSAU-MOSINEE PAPER CORPORATION

2ND STREET

BROKAW, WI 54417

Municipal code **37-106**

in the ☐ City ☐ Town ☒ Village ☐ Tribal

of **BROKAW**

in the county of **Marathon**

4. The mailing address for this facility is:

WAUSAU-MOSINEE PAPER CORPORATION

P.O. BOX 305

BROKAW, WI 54417

Attn: ~~BARRELL W. JEFFRIES~~

ROBERT P. KLENNER

5 Correspondence for this facility should be
mailed to the owner?

☒ YES

☐ NO

6 The owner of this facility is

WAUSAU-MOSINEE PAPER CORPORATION

P.O. BOX 305

BROKAW, WI 54417

Attn: ***FACILITY OWNER/OPERATOR***

7. The Standard Industrial Classification
(SIC) Code for this facility is: **2621**

8. THIS FACILITY HAS HAZARDOUS CHEMICALS PRESENT IN REPORTABLE AMOUNTS AND IS
REQUIRED TO FILE A TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY REPORT (SEE
INSTRUCTIONS).

☒ YES

☐ NO

(CONTINUED ON NEXT PAGE -- COMPLETION OF CERTIFICATION WITH SIGNATURE IS REQUIRED)

1999 INVENTORY FEE STATEMENT

(For Chemicals Present During Calendar Year 1998)

WISCONSIN EMERGENCY MANAGEMENT
DMA 1004 (R12-98) Wis Stat 166.20-21

WAUSAU-MOSINEE PAPER CORPORATION

9. If the answer to question 8 was 'NO', check the appropriate exemption(s) below which apply to this facility. If the answer was 'YES', skip this item.

- ☐ (a) This facility is not covered by the OSHA Hazard Communication Act and is not a private or public agency as defined by s. 166.20(1)(h) and (i). (See instructions)
- ☐ (b) This facility did not have present at any time last year any hazardous chemicals at or above 10,000 pounds. Also, it did not have any extremely hazardous substances at or above 500 pounds or the designated threshold planning quantity, if lower than 500 pounds. I understand that if the situation changes, it is the facility's responsibility to notify the SERB. (See instructions)
- ☐ (c) Per OSHA Hazard Communication Act regulations, hazardous chemicals present at this facility are not required to have Material Safety Data Sheets prepared for them or available at the facility because of CFR Chapter 29, Section 1910.1200(b) exemption(s) (see instructions)
- ☐ (d) Hazardous substances at this facility are exempt from Tier Two reporting because of one or more of the Section 311(e) exemptions. (see instructions)

10. This facility IS required to file a Tier Two report but is FULLY exempt from paying ANY annual inventory fees. If the answer to this question is 'YES', check the appropriate fee exemption(s) below. If 'NO', skip.

Change to

☒ No ☐ Yes

- ☐ (a) This is a petroleum marketing facility with reportable amounts of gasoline and/or diesel fuel present, held for resale or retail which is exempt from Inventory Fee calculation (see instructions for definition of a petroleum marketing facility) and there are no other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.
- ☐ (b) This facility has reportable amounts of sand and/or gravel present which are exempt from Inventory Fee calculation and there are no other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.
- ☐ (c) The operator of this facility had fewer than 10 full-time employees (20,000 hrs.) in the state of Wisconsin in 1996. There were a total of _____ (indicate the number) full-time equivalent employees.
- ☐ (d) This facility has reportable amounts of calcium chloride, sodium chloride and calcium magnesium acetate present, used as a road de-icing agent which is exempt from Inventory Fee calculation and there are no other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.

11. This facility is required to file a Tier Two report but is claiming a PARTIAL exemption from the fees because SOME of the reportable substances present are fee exempt as follows: If the answer to this question is 'YES', check the appropriate fee exemption(s) below. If 'NO', skip.

Change to

☒ No ☐ Yes

- ☐ (a) This is a petroleum marketing facility with reportable amounts of gasoline and/or diesel fuel present, held for resale or retail which is exempt from Inventory Fee calculation (see instructions for definition of a petroleum marketing facility) and there are other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.
- ☐ (b) This facility has reportable amounts of sand and/or gravel present which are exempt from Inventory Fee calculation and there are other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.
- ☐ (c) This facility has reportable amounts of calcium chloride, sodium chloride and calcium magnesium acetate present, used as a road de-icing agent which is exempt from Inventory Fee calculation and there are other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.

12. FEE DETERMINATION

- a. Total chemicals reported in 1999 (for chemicals present during calendar year 1998) a. # of chemicals listed on Tier Two
- b. Number of chemicals that are fee exempt: b.
- c. Number of chemicals that are NOT fee exempt (line a - b): c.
- d. Was the total weight of non-fee-exempt chemicals over 100,000 pounds? d. ☒ Yes ☐ No
- e. Fee Owed: (See schedule to determine fee.) e. Please enter on line 1 of the fee remittance
- f. Late payment surcharge: f. Please enter on line 2 of the fee remittance
- g. TOTAL FEES REMITTED (Add lines e and f.) g. Please enter on line 3 of the fee remittance

13. CERTIFICATION (Signature and date required)

I, as the owner/operator OR owner/operator's authorized representative, have reviewed this Fee Statement and certify that the information submitted is true, accurate and complete.

Printed Name: ROBERT P. KLENNER JR. Official Title: ENVIRONMENTAL MANAGER

Telephone Number: 715-675-3361 Signature: [Signature] Date Signed: 2/25/99

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-98) Wis. State 166.20

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 1

Facility Location		Owner/Operator.		WEM/SERB Facility ID.	
Name.	WAUSAU-MOSINEE PAPER CORPORATION	Name	WAUSAU-MOSINEE PAPER CORPORATION	001263-7	12637
Change to	<input type="text"/>	Change to:	<input type="text"/>	FEIN #:	390690900
Address.	2ND STREET	Address:	P.O. BOX 305	Change to:	<input type="text"/>
Change to	<input type="text"/>	Change to:	<input type="text"/>	SIC Code:	2621
City, State.	BROKAW, WI 54417	City, State:	BROKAW, WI 54417	Change to:	<input type="text"/>
Change to:	<input type="text"/>	Change to:	<input type="text"/>		

Emergency Contacts:	First:	KIRK ERMATINGER	Phone 1:	(715) 675-3361	24 hr Phone:	Not responsive
	Change to:	<input type="text"/>	Phone 1:	<input type="text"/>	24 hr Phone:	<input type="text"/>
	Second:	RONALD R OSTROMECKI	Phone 1:	(715) 675-3361	24 hr Phone:	Not responsive
	Change to:	ROBERT P. KLENNER	Phone 1:	<input type="text"/>	24 hr Phone:	<input type="text"/>

Chemical Description

Gas Number	Trade Secret	Pure	Mix	Solid	Liquid	Gas	EHS	7664417
007664-41-7	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	
<input type="text"/>	Change to: Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/> Check here to delete this chemical

Chemical name. **AQUA AMMONIA**

EHS Name **AMMONIA**

Physical and Health Hazards

Fire	Pressure	Reactivity	Immediate	Delayed
Current: Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to: No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
05	04	365	1,243,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	124,300 <input type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.	Pres	Temp	Storage locations
A <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	AQUA AMMONIA TANK MAIN ENTRANCE & CHEMICAL STORAGE AREA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Change location to (do not exceed space provided):	Confidential
<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>

Certification (Read and sign after completing all sections. Signature Required)

I certify under penalty of law that I have personally examined and am familiar with information submitted in pages 1 through 18 in addition to all attached documents, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

ROBERT P. KLENNER ENVIRONMENTAL MANAGER

Name and official title of owner/operator OR owner/operator's authorized representative

Robert P. Klenner
Signature

REQUIRED ATTACHMENT: ☒ I have attached a site plan.

Optional Attachments: ☐ I have attached a description of dikes and other safeguard measures.
☐ I have attached a list of site coordinate abbreviations

2/26/99
Date signed

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-98) Wis State 166.20

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 2

Facility Location:

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

Owner/Operator:

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

WEM/SERB Facility ID:

001263-7

12637

Chemical Description

Cas Number: 007664-93-9 Trade Secret: No ☒ Pure: Yes ☒ Mix: Yes ☒ Solid: No ☒ Liquid: Yes ☒ Gas: No ☒ EHS: Yes ☒ 7664939

Current: Change to: Yes ☐ No ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ ☐ Check here to delete this chemical

Chemical name: **SULFURIC ACID**

EHS Name: **SULFURIC ACID**

Physical and Health Hazards

Current: Fire: No ☒ Pressure: No ☒ Reactivity: Yes ☒ Immediate: Yes ☒ Delayed: No ☒

Change to: Yes ☐ Yes ☐ No ☐ No ☐ Yes ☐

Inventory (See instructions)

Max Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
05	05	365	153,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.: Pres: Temp: Storage locations

A ☐ 1 4 SULFURIC ACID TANK BACK SIDE OF MILL HAS SECONDARY CONTAINMENT 55 GAL

D ☐ 1 4 AREA BLDG 39 ALUM STORAGE TANK BLDG 3 BLDG #24 HAS BULK STORAGE

Change location to (do not exceed space provided):

Confidential

Chemical Description

Cas Number: 007782-50-5 Trade Secret: No ☒ Pure: Yes ☒ Mix: No ☒ Solid: No ☒ Liquid: Yes ☒ Gas: Yes ☒ EHS: Yes ☒ 7782505

Current: Change to: Yes ☐ No ☐ Yes ☐ Yes ☐ No ☐ No ☐ No ☐ ☐ Check here to delete this chemical

Chemical name: **CHLORINE**

EHS Name: **CHLORINE**

Physical and Health Hazards

Current: Fire: No ☒ Pressure: Yes ☒ Reactivity: Yes ☒ Immediate: Yes ☒ Delayed: No ☒

Change to: Yes ☐ No ☐ No ☐ No ☐ Yes ☐

Inventory (See instructions)

Max Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
06	05	365	1,350,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.: Pres: Temp: Storage locations

Q 2 4 RAIL YARD CHLORINE

L 2 4 UNLOADING AREA ONE TON CYLINDER AT WASTEWATER PLANT

Change location to (do not exceed space provided):

Confidential

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-98) Wis. State 166.20

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 4

Facility Location:

Owner/Operator:

WEM/SERB Facility ID:

12637

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

001263-7

Chemical Description

Cas Number 001310-73-2 Trade Secret No ☒ Pure No ☒ Mix Yes ☒ Solid No ☒ Liquid Yes ☒ Gas No ☒ EHS No ☒ 1310732

Change to: Yes ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ Yes ☐ ☐ Check here to delete this chemical

Chemical name: SODIUM HYDROXIDE

EHS Name (none)

Physical and Health Hazards

Current: Fire No ☒ Pressure No ☒ Reactivity Yes ☒ Immediate Yes ☒ Delayed No ☒

Change to: Yes ☐ Yes ☐ No ☐ No ☐ Yes ☐

Inventory (See instructions)

Max.Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
05	04	365	189,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.:	Pres.:	Temp.:	Storage locations
C <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	STORAGE AREA 5% CAUSTIC
A <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	TANK MAIN ENTRANCE CHEM
D <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	TANK IN BLDG 26 2ND FLOOR
A <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	BLDG #24
Q <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	RAIL YARK 50% CAUSTIC
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Change location to (do not exceed space provided): Confidential:

	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

Chemical Description

Cas Number 007704-34-9 Trade Secret No ☒ Pure Yes ☒ Mix No ☒ Solid Yes ☒ Liquid Yes ☒ Gas No ☒ EHS No ☒ 7704349

Change to: Yes ☐ No ☐ Yes ☐ No ☐ No ☐ Yes ☐ Yes ☐ ☐ Check here to delete this chemical

Chemical name: SULFUR

EHS Name (none)

Physical and Health Hazards

Current: Fire Yes ☒ Pressure No ☒ Reactivity No ☒ Immediate No ☒ Delayed No ☒

Change to: No ☐ Yes ☐ Yes ☐ Yes ☐ Yes ☐

Inventory (See instructions)

Max.Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
06	05	365	1,300,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont Pres. Temp Storage locations

Change location to (do not exceed space provided).

Confidential

WISCONSIN TIER TWO EM AGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-98) Wis State 166 20

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 5

Facility Location.

Owner/Operator

WEM/SERB Facility ID

12637

Name **WAUSAU-MOSINEE PAPER CORPORATION**

Name **WAUSAU-MOSINEE PAPER CORPORATION**

001263-7

A ☐ ☒ 1 ☒ 5 OUTSIDE STORAGE TANK

Q ☐ ☒ 1 ☒ 4 RAIL CARS

☐ ☐ ☐

☐

☐

☐

Chemical Description

Cas Number Trade Secret Pure Mix Solid Liquid Gas EHS 130578

000130-57-8 Current: No ☒ Yes ☒ No ☒ Yes ☒ No ☒ Yes ☒ No ☒ Yes ☒ No ☒ Yes ☒

☐ Change to: Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐

☐ Check here to delete this chemical

Chemical name: CALCIUM OXIDE

EHS Name (none)

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
05	04	365	102,000 pounds
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont. Pres. Temp. Storage locations

H ☐ ☒ 1 ☒ 4 OUTSIDE STORAGE SILO

☐ ☐ ☐

Change location to (do not exceed space provided).

Confidential

☐

☐

Chemical Description

Cas Number Trade Secret Pure Mix Solid Liquid Gas EHS 778244

000778-24-4 Current: No ☒ Yes ☒ No ☒ Yes ☒ No ☒ Yes ☒ No ☒ Yes ☒ No ☒ Yes ☒

☐ Change to: Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐

☐ Check here to delete this chemical

Chemical name: OXYGEN

EHS Name (none)

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current:	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
05	04	365	110,000 pounds
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp Storage locations

A ☐ 2 ☐ 7 ☐ OUTSIDE STORAGE TANK

Change location to (do not exceed space provided)

Confidential

☐

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-98) Wis. State 166.20

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 6

Facility Location:

Owner/Operator:

WEM/SERB Facility ID:

12637

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

001263-7

Chemical Description

Cas Number

000744-05-0

Current:

Trade Secret

No ☒

Pure

No ☒

Mix

Yes ☒

Solid

No ☒

Liquid

Yes ☒

Gas

No ☒

EHS

No ☒

744050

Change to:

Yes ☐

Yes ☐

No ☐

Yes ☐

No ☐

Yes ☐

Yes ☐

☒ Check here to delete this chemical

Chemical name: COPPER

EHS Name (none)

Physical and Health Hazards

Fire

No ☒

Pressure

No ☒

Reactivity

No ☒

Immediate

Yes ☒

Delayed

No ☒

Current:

Change to:

Yes ☐

Yes ☐

Yes ☐

No ☐

Yes ☐

Inventory (See instructions)

Max. Daily Amount

03

Avg. Daily Amount

02

No. of Days on site

365

Actual Maximum Amount

1,500 pounds ☐ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont. Pres. Temp.

C ☐ 1 ☐ 4 ☐

Storage locations

BEATER ROOM BLDG 39

Change location to (do not exceed space provided):

Confidential:

Chemical Description

Cas Number

(please enter)

Current:

Trade Secret

No ☒

Pure

No ☒

Mix

Yes ☒

Solid

No ☒

Liquid

Yes ☒

Gas

No ☒

EHS

No ☒

Change to:

Yes ☐

Yes ☐

No ☐

Yes ☐

No ☐

Yes ☐

Yes ☐

☐ Check here to delete this chemical

Chemical name: #2 FUEL OIL

EHS Name (none)

Physical and Health Hazards

Fire

Yes ☒

Pressure

No ☒

Reactivity

No ☒

Immediate

No ☒

Delayed

Yes ☒

Current:

Change to:

No ☐

Yes ☐

Yes ☐

Yes ☐

No ☐

Inventory (See instructions)

Max Daily Amount

06

Avg Daily Amount

06

No. of Days on site

365

Actual Maximum Amount

2,368,780 pounds ☐ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont. Pres. Temp.

A ☐ 1 ☐ 4 ☐

Storage locations

NEXT TO BLDG 24

Change location to (do not exceed space provided):

Confidential:

Continuation, Page for reporting additional Chemicals

DMA 1005 (R12-98) Wis State 166 20

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 7

Facility Location:

Name WAUSAU-MOSINEE PAPER CORPORATION

Owner/Operator:

Name WAUSAU-MOSINEE PAPER CORPORATION

SERB Facility ID.

12637

001263-7

Cas Number

Trade Secret

Pure

Mix

Solid

Liquid

Gas

EHS

Yes ☐Yes ☐Yes ☒Yes ☐Yes ☒Yes ☐Yes ☐No ☒No ☒No ☐No ☒No ☐No ☒No ☒☐ Check here to delete this chemical

Chemical name

EHS Name

FASTUSOL YELLOW 66 L

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max.Daily
Amount

04

Avg. Daily
Amount

04

No. of Days
on site

365

Actual Maximum
Amount

39,500

☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp.. Storage locations

Confidential

C 1 4 BLDG #46 BULK DYE STORAGE

Chemical Description

Cas Number

Trade Secret

Pure

Mix

Solid

Liquid

Gas

EHS

Yes ☐Yes ☐Yes ☒Yes ☐Yes ☒Yes ☐Yes ☐No ☒No ☒No ☐No ☒No ☐No ☒No ☒☐ Check here to delete this chemical

Chemical name:

EHS Name

FASTUSOL BLUE 79L

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max.Daily
Amount

04

Avg. Daily
Amount

04

No. of Days
on site

365

Actual Maximum
Amount

84,500

☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp.: Storage locations

Confidential

C 1 4 BLDG #46 BULK DYE STORAGE

Continuation Page for reporting additional Chemicals

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 8

Facility Location:

Name: WAUSAU-MOSINEE PAPER CORPORATION

Owner/Operator:

Name: WAUSAU-MOSINEE PAPER CORPORATION

SERB Facility ID

001263-7

12637

Cas Number

Trade Secret

Yes ☐No ☒

Pure

Yes ☐No ☒

Mix

Yes ☒No ☐

Solid

Yes ☐No ☒

Liquid

Yes ☒No ☐

Gas

Yes ☐No ☒

EHS

Yes ☐No ☒☐ Check here to delete this chemical

Chemical name:

EHS Name

PONTAMINE YELLOW EM LIQUID

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max. Daily
Amount

04

Avg. Daily
Amount

04

No. of Days
on site

365

Actual Maximum
Amount39,500 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp Storage locations

Confidential

C 1 4 BLDG #46 BULK DYE STORAGE

Chemical Description

Cas Number

Trade Secret

Yes ☐No ☒

Pure

Yes ☐No ☒

Mix

Yes ☒No ☐

Solid

Yes ☐No ☒

Liquid

Yes ☒No ☐

Gas

Yes ☐No ☒

EHS

Yes ☐No ☒☐ Check here to delete this chemical

Chemical name:

EHS Name

NALCO 7659

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☒No ☐

Inventory (See instructions)

Max Daily
Amount

04

Avg. Daily
Amount

04

No. of Days
on site

365

Actual Maximum
Amount54,300 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp : Storage locations

Confidential

C 1 4 NW CORNER OF BLDG 35

Continuation Page for reporting additional Chemicals

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 9

Facility Location:

Name WAUSAU-MOSINEE PAPER CORPORATION

Owner/Operator:

Name WAUSAU-MOSINEE PAPER CORPORATION

SERB Facility ID:

001263-7

12637

Cas Number

Trade Secret

Yes ☐No ☒

Pure

Yes ☐No ☒

Mix

Yes ☒No ☐

Solid

Yes ☐No ☒

Liquid

Yes ☒No ☐

Gas

Yes ☐No ☒

EHS

Yes ☐No ☒☐ Check here to delete this chemical

Chemical name

NALCLEAR 8182

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max.Daily
Amount

04

Avg. Daily
Amount

03

No. of Days
on site

365

Actual Maximum
Amount18,500 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp. Storage locations

Confidential

C 1 4 NE CORNER BLDG 45B

Chemical Description

Cas Number

Trade Secret

Yes ☐No ☒

Pure

Yes ☐No ☒

Mix

Yes ☒No ☐

Solid

Yes ☐No ☒

Liquid

Yes ☒No ☐

Gas

Yes ☐No ☒

EHS

Yes ☐No ☒☐ Check here to delete this chemical

Chemical name

NALCO 7530

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max Daily
Amount

04

Avg. Daily
Amount

04

No. of Days
on site

365

Actual Maximum
Amount28,900 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp. Storage locations

Confidential

0 1 4 BLDG 12 CHEMICAL STORAGE AREA

Continuation page for reporting additional Chemicals

DMA 1005 (R12-98) Wis State 166.20

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 10

Facility Location.

Name WAUSAU-MOSINEE PAPER CORPORATION

Owner/Operator:

Name WAUSAU-MOSINEE PAPER CORPORATION

SERB Facility ID

12637

001263-7

Cas Number

Trade Secret

Pure

Mix

Solid

Liquid

Gas

EHS

Yes ☐Yes ☐Yes ☒Yes ☐Yes ☒Yes ☐Yes ☐No ☒No ☒No ☐No ☒No ☐No ☒No ☒☐ Check here to delete this chemical

Chemical name

EHS Name

NALCO 8623 PLUS

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max Daily
Amount

04

Avg. Daily
Amount

03

No. of Days
on site

365

Actual Maximum
Amount12,480 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp Storage locations

Confidential

0 1 4 BLDG 12 CHEMICAL STORAGE AREA

0 1 4 BLDG 44

Chemical Description

Cas Number

Trade Secret

Pure

Mix

Solid

Liquid

Gas

EHS

Yes ☐Yes ☐Yes ☒Yes ☐Yes ☒Yes ☐Yes ☐No ☒No ☒No ☐No ☒No ☐No ☒No ☒☐ Check here to delete this chemical

Chemical name.

EHS Name

NALCO 8669 ANTIFOAM

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max. Daily
Amount

04

Avg. Daily
Amount

03

No. of Days
on site

365

Actual Maximum
Amount15,000 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp Storage locations

Confidential

0 1 4 BASEMENT BLDG 39

Continuation . . . ge for reporting additional C. . nicals

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 11

Facility Location:

Name: WAUSAU-MOSINEE PAPER CORPORATION

Owner/Operator

Name: WAUSAU-MOSINEE PAPER CORPORATION

SERB Facility ID

001263-7

12637

Gas Number

Trade Secret

Yes ☐No ☒

Pure

Yes ☐No ☒

Mix

Yes ☒No ☐

Solid

Yes ☐No ☒

Liquid

Yes ☒No ☐

Gas

Yes ☐No ☒

EHS

Yes ☐No ☒☐ Check here to delete this chemical

Chemical name:

NALCON 7647

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max.Daily
AmountAvg. Daily
AmountNo. of Days
on siteActual Maximum
Amount ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp Storage locations

Confidential

 BLDG 12 CHEMICAL STORAGE AREA ☐ BLDG 3 ☐

Chemical Description

Gas Number

Trade Secret

Yes ☐No ☒

Pure

Yes ☐No ☒

Mix

Yes ☒No ☐

Solid

Yes ☐No ☒

Liquid

Yes ☒No ☐

Gas

Yes ☐No ☒

EHS

Yes ☐No ☒☐ Check here to delete this chemical

Chemical name:

NALKLEEN 2607

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max.Daily
AmountAvg. Daily
AmountNo. of Days
on siteActual Maximum
Amount ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp.: Storage locations

Confidential:

 BLDG 34 A CHEMICAL STORAGE AREA ☐ ☐ ☐

Continuation Page for reporting additional Chemicals

DMA 1005 (R12-98) Wis State 166 20

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 12

Facility Location:

Name WAUSAU-MOSINEE PAPER CORPORATION

Owner/Operator:

Name WAUSAU-MOSINEE PAPER CORPORATION

SERB Facility ID

12637

001263-7

Cas Number

Trade Secret

Pure

Mix

Solid

Liquid

Gas

EHS

Yes ☐Yes ☐Yes ☒Yes ☐Yes ☒Yes ☐Yes ☐No ☒No ☒No ☐No ☒No ☐No ☒No ☒☐ Check here to delete this chemical

Chemical name:

NALKLEEN 2642

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☒No ☐

Inventory (See instructions)

Max. Daily
Amount

04

Avg. Daily
Amount

03

No. of Days
on site

365

Actual Maximum
Amount11,800 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp.: Storage locations

Confidential

0 1 4 BLDG 34A CHEMICAL STORAGE AREA

Chemical Description

Cas Number

Trade Secret

Pure

Mix

Solid

Liquid

Gas

EHS

Yes ☐Yes ☐Yes ☒Yes ☐Yes ☒Yes ☐Yes ☐No ☒No ☒No ☐No ☒No ☐No ☒No ☒☐ Check here to delete this chemical

Chemical name:

NALSTRIP 12

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max. Daily
Amount

04

Avg. Daily
Amount

03

No. of Days
on site

365

Actual Maximum
Amount10,800 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp.: Storage locations

Confidential

0 1 4 BLDG 34A CHEMICAL STORAGE AREA

Continuation. Page for reporting additional Chemicals

DMA 1005 (R12-98) Wis State 166 20

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 13

Facility Location

Name WAUSAU-MOSINEE PAPER CORPORATION

Owner/Operator.

Name WAUSAU-MOSINEE PAPER CORPORATION

SERB Facility ID.

001263-7

12637

Cas Number

Trade Secret

Pure

Mix

Solid

Liquid

Gas

EHS

Yes ☐Yes ☐Yes ☒Yes ☐Yes ☒Yes ☐Yes ☐No ☒No ☒No ☐No ☒No ☐No ☒No ☒☐ Check here to delete this chemical

Chemical name:

NALSTRIP 2601

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max.Daily
Amount

04

Avg. Daily
Amount

04

No of Days
on site

365

Actual Maximum
Amount53,800 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp : Storage locations

Confidential

0 1 4 BLDG 34A CHEMICAL STORAGE AREA

E 1 4 BLDG 34A CHEMICAL STORAGE AREA

Chemical Description

Cas Number

Trade Secret

Pure

Mix

Solid

Liquid

Gas

EHS

Yes ☐Yes ☐Yes ☒Yes ☐Yes ☒Yes ☐Yes ☐No ☒No ☒No ☐No ☒No ☐No ☒No ☒☐ Check here to delete this chemical

Chemical name:

NALSTRIP 7581

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max Daily
Amount

04

Avg. Daily
Amount

03

No of Days
on site

365

Actual Maximum
Amount13,900 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp : Storage locations

Confidential.

0 1 4 BLDG 12 CHEMICAL STORAGE AREA

Continuation Page for reporting additional Chemicals

DMA 1005 (R12-98) Wis State 166.20

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 14

Facility Location:

Name: WAUSAU-MOSINEE PAPER CORPORATION

Owner/Operator:

Name: WAUSAU-MOSINEE PAPER CORPORATION

SERB Facility ID

001263-7

12637

Cas Number

Trade Secret

Yes ☐No ☒

Pure

Yes ☐No ☒

Mix

Yes ☒No ☐

Solid

Yes ☐No ☒

Liquid

Yes ☒No ☐

Gas

Yes ☐No ☒

EHS

Yes ☐No ☒☐ Check here to delete this chemical

Chemical name

POSITEK 8671

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☒No ☐

Inventory (See instructions)

Max.Daily
Amount

04

Avg. Daily
Amount

04

No. of Days
on site

365

Actual Maximum
Amount

35,350

☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp Storage locations

Confidential

☐ ☐ ☐ BASEMENT BLDG 29☐ ☐ ☐ BASEMENT BLDG 3

Chemical Description

Cas Number

Trade Secret

Yes ☐No ☒

Pure

Yes ☐No ☒

Mix

Yes ☒No ☐

Solid

Yes ☐No ☒

Liquid

Yes ☒No ☐

Gas

Yes ☐No ☒

EHS

Yes ☐No ☒☐ Check here to delete this chemical

Chemical name:

CARTASOL TURQUOISE K-RL

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☒No ☐

Inventory (See instructions)

Max Daily
Amount

04

Avg. Daily
Amount

03

No. of Days
on site

365

Actual Maximum
Amount

12,000

☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp.: Storage locations

Confidential

☐ ☐ ☐ BLDG 39 DYE STORAGE AREA☐ ☐ ☐☐ ☐ ☐

Continuation page for reporting additional Chemicals

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 15

Facility Location:

Name: WAUSAU-MOSINEE PAPER CORPORATION

Owner/Operator:

Name: WAUSAU-MOSINEE PAPER CORPORATION

SERB Facility ID:

001263-7

12637

Cas Number

Trade Secret

Yes ☐No ☒

Pure

Yes ☐No ☒

Mix

Yes ☒No ☐

Solid

Yes ☐No ☒

Liquid

Yes ☒No ☐

Gas

Yes ☐No ☒

EHS

Yes ☐No ☒☐ Check here to delete this chemical

Chemical name

INTRABOND BRILLIANT PINK BR

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max.Daily
Amount

04

Avg. Daily
Amount

03

No. of Days
on site

365

Actual Maximum
Amount

15,900

☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp.: Storage locations

Confidential

0

1

4

BLDG 39 DYE STORAGE AREA

Chemical Description

Cas Number

Trade Secret

Yes ☐No ☒

Pure

Yes ☐No ☒

Mix

Yes ☒No ☐

Solid

Yes ☐No ☒

Liquid

Yes ☒No ☐

Gas

Yes ☐No ☒

EHS

Yes ☐No ☒☐ Check here to delete this chemical

Chemical name:

PERGASOL YELLOW F-6 GL

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max.Daily
Amount

04

Avg. Daily
Amount

03

No. of Days
on site

365

Actual Maximum
Amount

11,000

☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp.: Storage locations

Confidential

0

1

4

BLDG 39 DYE STORAGE AREA

Continuation Page for reporting additional Chemicals

DMA 1005 (R12-98) Wis State 166.20

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 16

Facility Location:

Name: WAUSAU-MOSINEE PAPER CORPORATION

Owner/Operator

Name: WAUSAU-MOSINEE PAPER CORPORATION

SERB Facility ID

12637

001263-7

Cas Number

Trade Secret

Yes ☐No ☒

Pure

Yes ☐No ☒

Mix

Yes ☒No ☐

Solid

Yes ☐No ☒

Liquid

Yes ☒No ☐

Gas

Yes ☐No ☒

EHS

Yes ☐No ☒☐ Check here to delete this chemical

Chemical name

PERGASOL YELLOW 3G

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max.Daily
Amount

04

Avg. Daily
Amount

04

No. of Days
on site

365

Actual Maximum
Amount98,500 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp Storage locations

0

1

4

BLDG 39 DYE STORAGE AREA

Confidential

Chemical Description

Cas Number

Trade Secret

Yes ☐No ☒

Pure

Yes ☐No ☒

Mix

Yes ☒No ☐

Solid

Yes ☐No ☒

Liquid

Yes ☒No ☐

Gas

Yes ☐No ☒

EHS

Yes ☐No ☒☐ Check here to delete this chemical

Chemical name.

PONTAMINE BRILLIANT BOND BLUE A

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max.Daily
Amount

04

Avg. Daily
Amount

04

No. of Days
on site

365

Actual Maximum
Amount91,500 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp.. Storage locations

0

1

4

BLDG 39 DYE STORAGE AREA

Confidential

Continuation page for reporting additional Chemicals

For use in reporting chemicals present during 1998. (DUE MARCH 1, 1999)

Page 17

Facility Location:

Name WAUSAU-MOSINEE PAPER CORPORATION

Owner/Operator:

Name WAUSAU-MOSINEE PAPER CORPORATION

SERB Facility ID

12637

001263-7

Cas Number

Trade Secret

Pure

Mix

Solid

Liquid

Gas

EHS

Yes ☐Yes ☐Yes ☒Yes ☐Yes ☒Yes ☐Yes ☐No ☒No ☒No ☐No ☒No ☐No ☒No ☒☐ Check here to delete this chemical

Chemical name

CASCO RESIN PR - 335CU

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☒No ☐

Inventory (See instructions)

Max.Daily
Amount

04

Avg. Daily
Amount

03

No. of Days
on site

365

Actual Maximum
Amount

13,000

☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp Storage locations

Confidential

I

1

4

BLDG 34A CHEMICAL STORAGE AREA

Chemical Description

Cas Number

Trade Secret

Pure

Mix

Solid

Liquid

Gas

EHS

Yes ☐Yes ☐Yes ☒Yes ☐Yes ☒Yes ☐Yes ☐No ☒No ☒No ☐No ☒No ☐No ☒No ☒☐ Check here to delete this chemical

Chemical name

HYDROGEN PEROXIDE 50% SOLN

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

Max Daily
Amount

04

Avg Daily
Amount

04

No. of Days
on site

365

Actual Maximum
Amount

42,600

☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp Storage locations

Confidential

A

1

4

SE OF BLDG 49

Continuation, page for reporting additional Chemicals

DMA 1005 (R12-98) Wis State 166.20

For use in reporting chemicals present during 1998 (DUE MARCH 1, 1999)

Page 18

Facility Location

Name WAUSAU-MOSINEE PAPER CORPORATION

Owner/Operator

Name WAUSAU-MOSINEE PAPER CORPORATION

SERB Facility ID

001263-7

12637

Cas Number

01309-42-8

Trade Secret

Yes ☐No ☒

Pure

Yes ☐No ☒

Mix

Yes ☒No ☐

Solid

Yes ☐No ☒

Liquid

Yes ☒No ☐

Gas

Yes ☐No ☒

EHS

Yes ☐No ☒☐ Check here to delete this chemical

Chemical name

MAGNESIUM HYDROXIDE

EHS Name

Physical and Health Hazards

Fire

Yes ☐No ☒

Pressure

Yes ☐No ☒

Reactivity

Yes ☐No ☒

Immediate

Yes ☒No ☐

Delayed

Yes ☐No ☒

Inventory (See instructions)

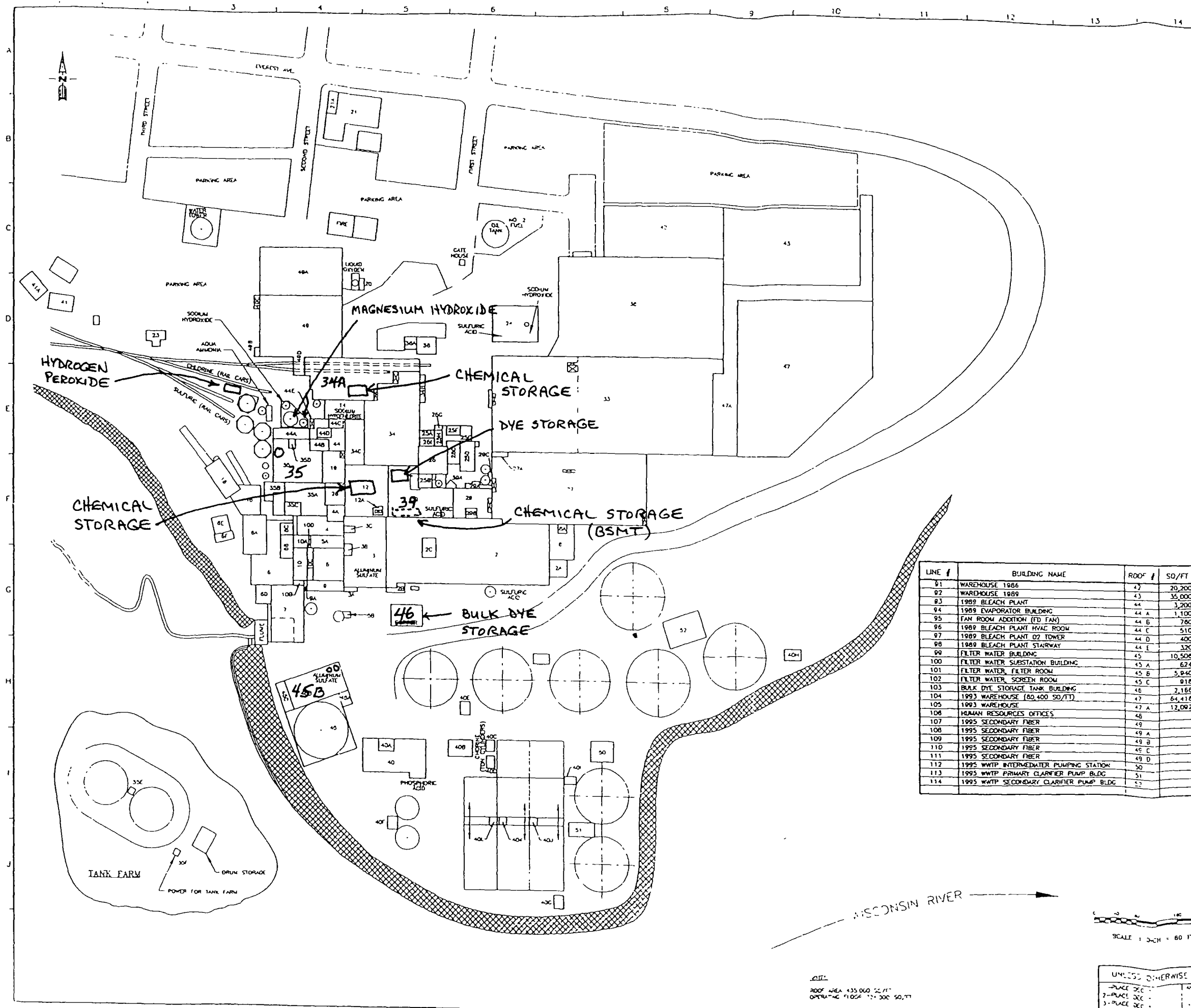
Max Daily
Amount06Avg. Daily
Amount05No. of Days
on site365Actual Maximum
Amount1,800,000 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp Storage locations

Confidential

<u>A</u>	<u>1</u>	<u>4</u>	<u>ADJACENT TO BLDG 44A</u>	<input type="checkbox"/>
<u>A</u>	<u>1</u>	<u>4</u>	<u>ADJACENT TO BLDG 44A</u>	<input type="checkbox"/>
<u>Q</u>	<u>1</u>	<u>4</u>	<u>RAIL YARD</u>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>



LINE #	BUILDING NAME	ROOF #	SO/FT
01	WAREHOUSE 1988	47	20,200
02	WAREHOUSE 1989	43	35,000
03	1989 BLEACH PLANT	44	3,200
04	1989 EVAPORATOR BUILDING	44 A	1,100
05	FAN ROOM ADDITION (TD TAN)	44 B	760
06	1989 BLEACH PLANT HVAC ROOM	44 C	510
07	1989 BLEACH PLANT O2 TOWER	44 D	400
08	1989 BLEACH PLANT STAIRWAY	44 E	320
09	FILTER WATER BUILDING	45	10,506
100	FILTER WATER SUBSTATION BUILDING	45 A	624
101	FILTER WATER FILTER ROOM	45 B	5,240
102	FILTER WATER SCREEN ROOM	45 C	918
103	BULK DYE STORAGE TANK BUILDING	46	2,160
104	1993 WAREHOUSE (80,400 SO/FT)	47	64,416
105	1993 WAREHOUSE	47 A	12,082
106	HUMAN RESOURCES OFFICES	48	
107	1995 SECONDARY FIBER	49	
108	1995 SECONDARY FIBER	49 A	
109	1995 SECONDARY FIBER	49 B	
110	1995 SECONDARY FIBER	49 C	
111	1995 SECONDARY FIBER	49 D	
112	WWTP INTERMEDIATE PUMP STATION	50	
113	1995 WWTP PRIMARY CLARIFIER PUMP BLDG	51	
114	1995 WWTP SECONDARY CLARIFIER PUMP BLDG	52	

LINE #	BUILDING NAME	ROOF #	SO/FT
01	MACHINE ROOM BUILDING	2	34,400
02	MACHINE ROOM LOADING DOCK	2 A	1,009
03	MACHINE ROOM SUBSTATION NO. 10	2 B	
04	MACHINE ROOM PENTHOUSE MAKE-UP AIR UNIT	2 C	802
05	BEATER ROOM BUILDING	3	6,000
06	BEATER ROOM BREZZEWAY	3 A	
07	BEATER ROOM PONT HOUSE	3 B	
08	BEATER ROOM PONT HOUSE	3 C	
09	BOILER HOUSE NO. 1	4	5,700
10	SUBSTATION NO. 7	4 A	
11	SCREEN & DECKER ROOM	5	3,500
12	SCREEN ROOM LOCKER ROOM	5 A	
13	SCREENED SUPPLY CHEST PUMP HOUSE	5 B	
14	WOOD ROOM, CHIPPING BUILDING	6	10,100
15	WOOD ROOM, DEBARKING DRUM BUILDING	6 A	2,000
16	WOOD ROOM, CHIP SCREEN BUILDING	6 B	
17	WOOD ROOM	6 C	
18	SUBSTATION NO. 3	6 D	
19	WOOD ROOM, CHIP REJECT LOADING	6 E	
20	WOOD ROOM, CHIP REJECT	6 F	
21	WATER INTAKE BUILDING (PAINT SHOP)	7	7,000
22	WELL OFFICES (CASHIER, S&S, ETC.)	8	3,000
23	PENTHOUSE	8 A	
24	ENGINEERING OFFICES, SCREEN & H2O PUMP RM	9	1,400
25	ROOF SECTION	9 A	
26	DIGESTER BUILDING (NO. 1, 2 & 3 DIGESTERS)	10	2,500
27	DIGESTER BUILDING (NO. 4 DIGESTER)	10 A	
28	DIGESTER TESTING ROOM	10 B	
29	DIGESTER HEATER BUILDING	10 C	
30	DIGESTER STAIRWAY BUILDING	10 D	
31	OLD BLEACH PLANT (SK CAUSTIC TANKS)	12	10,000
32	OLD BLEACH PLANT (ELEVATOR) PENTHOUSE	12 A	288
33	BLEACH LIQUOR BUILDING	14	2,600
34	EAST SLASHER BUILDING	16	2,180
35	WEST SLASHER BUILDING	18	2,450
36	OLD BLEACH PLANT (HYPO TOWER)	19	2,520
37	GAS METERING HOUSE	20	1,860
38	WARM OFFICES (PURCHASING)	21	
39	WARM OFFICES (ENTRANCE)	21 A	
40	WOODLAND AND YARD OFFICE	23	1,250
41	BOILER HOUSE NO. 3	24	
42	BOILER HOUSE NO. 2	25	3,530
43	OLD COMPRESSOR BUILDING	25 A	560
44	FEED WATER BUILDING	25 B	480
45	BAW PACKAGE BOILER BUILDING	25 C	
46	ERE BOILER BUILDING	25 D	
47	WICKS BOILER BUILDING	25 E	
48	ECONOMIZER BUILDING	25 F	
49	NO. 4 BOILER TD FAN	25 G	
50	CHEMICAL STORAGE BUILDING	25 H	
51	OLD COMPRESSOR BUILDING	25 I	
52	ACCUMULATOR BUILDING	28	1,880
53	CUTTER ROOM (RAWMERS & EXECUTIVE OFFICES)	27	35,250
54	CUTTER ROOM RESTROOM BUILDING	27 A	
55	R & D TECHNICAL LAB AND STARCH KITCHEN	29	4,400
56	BREZZEWAY	29 A	
57	PENTHOUSE - HVAC	29 B	
58	SLO DUCT COLLECTION BUILDING	29 C	
59	FRESHING ROOM & MAINTENANCE SHOP	33	66,300
60	WATERIAL HANDLING BUILDING	34	14,930
61	WATERIAL HANDLING AND RECEIVING	34 A	8,840
62	MAINTENANCE OFFICES (O-D)	34 B	1,080
63	HIGH DENSITY TOWERS	34 C	2,740
64	COPELAND REACTOR, EVAPORATOR BUILDING	35	7,700
65	FORTIFICATION TOWER RECOVERY BOILER	35 A	4,100
66	150 LB. RECOVERY BOILER COOLING VENTUR	35 B	
67	STACK MONITORING BUILDING	35 C	
68	PENTHOUSE TO CONDENSER	35 D	
69	TANK FARM MCC BLDG	35 E	140
70	TANK FARM PUMP BLDG	35 F	180
71	SWITCHGEAR BUILDING	36	1,600
72	SWITCHGEAR BUILDING	35 A	
73	WAREHOUSE 1989	38	54,400
74	WATERIAL STORAGE BUILDING	39	9,260
75	WATERIAL STORAGE LOADING DOOR	39 A	
76	WASTE WATER TREATMENT	40	19,360
77	WASTE WATER TREATMENT PENTHOUSE	40 A	
78	WASTE WATER TREATMENT BLOWER BUILDING	40 B	
79	WASTE WATER TREATMENT CHLORINATION BLDG	40 C	
80	WASTE WATER TREATMENT SLUDGE BUILDING	40 D	
81	WASTE WATER TREATMENT MAINTENANCE SHOP	40 E	
82	SLUDGE THICKENER CONTROL BUILDING	40 F	
83	WASTE TREATMENT METERING BUILDING	40 G	
84	FINAL OUTFALL BUILDING	40 H	100
85	WASTE TREATMENT DIVERSION BUILDING	40 I	
86	SECONDARY CLARIFIER BRIDGE HOUSE EAST	40 J	
87	SECONDARY CLARIFIER BRIDGE HOUSE CENTER	40 K	
88	PRIMARY CLARIFIER BRIDGE HOUSE WEST	40 L	
89	GARAGE (COMPANY TRUCK)	41	2,170
90	1993 GARAGE	41 A	

ROOF AREA 435,000 SQ/FT
OPERATING AREA 120,000 SQ/FT

WISCONSIN RIVER

SCALE 1" = 80 FEET

UNLESS OTHERWISE SPECIFIED
- PLACE DEC
- PLACE DEC
- PLACE DEC
- PLACE DEC

3	02/26/96	DU	ADDED BLDG #49 #50 #51 & #52
2	01/15/95	DL	GENERAL UPDATE
1	02/12/94	JTI	GENERAL UPDATE & ADDED BLDG #24 #40 & #47
REV	DATE	BY	DESCRIPTION
ENGINEER			
DESIGN	JTI		WAUSAU PAPER MILLS PLOT PLAN SCALE TITLE 11"
DRAW	JTI		
CHECKED			
APPROVED			
SCALE	1" = 80		
DATE	02-23-90		
10329-D-17S			
17 YARD 1100637			
WAUSAU PAPERS			
WAUSAU PAPER MILLS COMPANY			
3			

REPORT YEAR 1999

2000 INVENTORY FEE STATEMENT

(For Chemicals Present During Calendar Year 1999)

WAUSAU-MOSINEE PAPER CORPORATION

WISCONSIN EMERGENCY MANAGEMENT
DMA 1004 (R12-99) Wis. Stat. 166.20-21

001263-7

Information as it appeared last year:

Please make corrections in the boxes below:

1. This site has been assigned as its WEM facility
Identification number:

001263-7

2. The owner's Federal Employee Identification
Number is.

390690900

3. The facility's name and physical location is:
WAUSAU-MOSINEE PAPER CORPORATION

2ND STREET

BROKAW, WI 54417

Municipal code **37-106**

in the ☐ City ☐ Town ☒ Village ☐ Tribal

of **BROKAW**

in the county of **Marathon**

4 The mailing address for this facility is
WAUSAU-MOSINEE PAPER CORPORATION

P.O. BOX 305

BROKAW, WI 54417

Attn **ROBERT P. KLENNER**

5 Correspondence for this facility should be
mailed to the owner?

☒ YES

☐ NO

6 The owner of this facility is
WAUSAU-MOSINEE PAPER CORPORATION

P.O. BOX 305

BROKAW, WI 54417

Attn: ***FACILITY OWNER/OPERATOR***

7 The Standard Industrial Classification
(SIC) Code for this facility is: **2621**

8. THIS FACILITY HAS HAZARDOUS CHEMICALS PRESENT IN REPORTABLE AMOUNTS AND IS
REQUIRED TO FILE A TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY REPORT (SEE
INSTRUCTIONS).

☒ YES

☐ NO

(CONTINUED ON NEXT PAGE -- COMPLETION OF CERTIFICATION WITH SIGNATURE IS REQUIRED)

File

2000 INVENTORY FEE STATEMENT

(For Chemicals Present During Calendar Year 1999)

WISCONSIN EMERGENCY MANAGEMENT
DMA 1004 (R12-99) Wis. Stat 166.20-21

WAUSAU-MOSINEE PAPER CORPORATION

9. If the answer to question 8 was 'NO', check the appropriate exemption(s) below which apply to this facility. If the answer was 'YES', skip this item.

- ☐ (a) This facility is not covered by the OSHA Hazard Communication Act and is not a private or public agency as defined by s. 166.20 (1)(h) and (i). (See instructions)
- ☐ (b) This facility did not have present at any time last year any hazardous chemicals at or above 10,000 pounds. Also, it did not have any extremely hazardous substances at or above 500 pounds or the designated threshold planning quantity, if lower than 500 pounds. I understand that if the situation changes, it is the facility's responsibility to notify WEM. (See instructions)
- ☐ (c) Per OSHA Hazard Communication Act regulations, hazardous chemicals present at this facility are not required to have Material Safety Data Sheets prepared for them or available at the facility because of CFR Chapter 29, Section 1910.1200(b) exemption(s). (see instructions)
- ☐ (d) Hazardous substances at this facility are exempt from Tier Two reporting because of one or more Section 311(e) exemptions. (see instructions)
- ☒ (e) This is a petroleum marketing facility and the higher reporting thresholds for gasoline and diesel fuel apply (see instructions)

10. This facility IS required to file a Tier Two report but is FULLY exempt from paying ANY annual inventory fees. If the answer to this question is 'YES', check the appropriate fee exemption(s) below. If 'NO', skip.

Change to

☒ No ☐ Yes

- ☐ (a) This is a petroleum marketing facility with reportable amounts of gasoline and/or diesel fuel present, held for resale or retail which are exempt from Inventory Fee calculation (see instructions for definition of a petroleum marketing facility) and there are no other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility
- ☐ (b) This facility has reportable amounts of sand and/or gravel present which are exempt from Inventory Fee calculation and there are no other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility
- ☐ (c) The operator of this facility had fewer than 10 full-time employees (20,000 hrs.) in the state of Wisconsin in 1999. There were a total of _____ (indicate the number) full-time equivalent employees.
- ☐ (d) This facility has reportable amounts of calcium chloride, sodium chloride and calcium magnesium acetate present, used as a road de-icing agent which are exempt from Inventory Fee calculation and there are no other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.

11. This facility is required to file a Tier Two report but is claiming a PARTIAL exemption from the fees because SOME of the reportable substances present are fee exempt as follows. If the answer to this question is 'YES', check the appropriate fee exemption(s) below. If 'NO', skip.

Change to

☒ No ☐ Yes

- ☐ (a) This is a petroleum marketing facility with reportable amounts of gasoline and/or diesel fuel present, held for resale or retail which are exempt from Tier Two Reporting (see instructions for definition of a petroleum marketing facility) and there are other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility
- ☐ (b) This facility has reportable amounts of sand and/or gravel present which are exempt from Inventory Fee calculation and there are other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.
- ☐ (c) This facility has reportable amounts of calcium chloride, sodium chloride and calcium magnesium acetate present, used as a road de-icing agent which are exempt from Inventory Fee calculation and there are other reportable hazardous chemicals subject to Inventory Fee calculation present at the facility.

12. FEE DETERMINATION

- a. Total chemicals reported in 2000 (for chemicals present during calendar year 1999) a # of chemicals listed on Tier Two
- b. Number of chemicals that are fee exempt: b
- c. Number of chemicals that are NOT fee exempt (line a - b): c
- d. Was the total weight of non-fee-exempt chemicals over 100,000 pounds? d ☒ Yes ☐ No
- e. Fee Owed: (See schedule to determine fee.) e Please enter on line 1 of the fee remittance
- f. Late payment surcharge: f Please enter on line 2 of the fee remittance
- a) Fee paid on time, enter 0
- b) Fee paid late, enter 20% of amount on line e.
- g. TOTAL FEES REMITTED (Add lines e and f.) g Please enter on line 3 of the fee remittance

13 CERTIFICATION (Original signature and date required):

I, as the owner/operator OR owner/operator's authorized representative, have reviewed this Fee Statement and certify that the information submitted is true, accurate and complete.

Printed Name: THOMAS W. CRAVEN

Official Title: VICE PRESIDENT - OPERATIONS

Telephone Number: 715-675-3361

Signature: Thomas W. Craven

Date Signed: 2/03/00

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-99) Wis. State 166.20

For use in reporting chemicals present during 1999. (DUE MARCH 1, 2000)

Page 1

Facility Location:		Owner/Operator:		WEM/SERB Facility ID: 12637	
Name:	WAUSAU-MOSINEE PAPER CORPORATION	Name:	WAUSAU-MOSINEE PAPER CORPORATION	001263-7	
Change to:		Change to:		FEIN #:	390690900
Address:	2ND STREET	Address:	P.O. BOX 305	Change to:	
Change to:		Change to:		SIC Code:	2621
City, State:	BROKAW, WI 54417	City, State:	BROKAW, WI 54417	Change to:	
Change to:		Change to:			

Emergency Contacts:	First:	KIRK ERMATINGER	Phone 1:	(715) 675-3361	24 hr Phone:	Not responsive
	Change to:	JOE BAREGI	Phone 1:		24 hr Phone:	
	Second:	ROBERT P. KLENNERCKI	Phone 1:	(715) 675-3361	24 hr Phone:	Not responsive
	Change to:	ROBERT P. KLENNER	Phone 1:		24 hr Phone:	

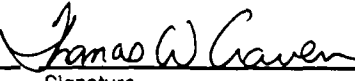
Chemical Description

Cas Number	007664-41-7	Trade Secret	No <input checked="" type="checkbox"/>	Pure	No <input checked="" type="checkbox"/>	Mix	Yes <input checked="" type="checkbox"/>	Solid	No <input checked="" type="checkbox"/>	Liquid	Yes <input checked="" type="checkbox"/>	Gas	Yes <input checked="" type="checkbox"/>	EHS	Yes <input checked="" type="checkbox"/>	7664417
Change to:		Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/> Check here to delete this chemical		

Chemical name: AQUA AMMONIA	EHS Name AMMONIA

Physical and Health Hazards					Inventory (See Instructions)			
Fire	Pressure	Reactivity	Immediate	Delayed	Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
Current: Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	05	04	365	124,300 pounds
Change to: No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>				<input type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)					Change location to (do not exceed space provided):	Confidential:
Cont.: A <input type="checkbox"/>	Pres.: 1 <input type="checkbox"/>	Temp.: 4 <input type="checkbox"/>	Storage locations			<input type="checkbox"/>
AQUA AMMONIA TANK MAIN ENTRANCE & CHEMICAL STORAGE AREA						<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>

Certification (Read and sign after completing all sections. Signature Required)			REQUIRED ATTACHMENT: <input checked="" type="checkbox"/> I have attached a site plan.
I certify under penalty of law that I have personally examined and am familiar with information submitted in pages 1 through <u>17</u>			
In addition to all attached documents, and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.			Optional Attachments: <input type="checkbox"/> I have attached a description of dikes and other safeguard measures.
			<input type="checkbox"/> I have attached a list of site coordinate abbreviations.
THOMAS W. CRAVEN, VICE PRESIDENT OPERATIONS			2/03/00
Name and official title of owner/operator OR owner/operator's authorized representative		Signature	Date signed

WISCONSIN Tier Two Emergency and Hazardous Chemical Inventory

DMA 1005 (R12-99) Wis. State 166.20

For use in ref

ing chemicals present during 1999 (DUE

RCH 1, 2000)

Page 2

Facility Location

Owner/Operator

WEM/SERB Facility ID#

12637

Name: WAUSAU-MOSINEE PAPER CORPORATION

Name: WAUSAU-MOSINEE PAPER CORPORATION

001263-7

Chemical Description

Cas Number 007664-93-9	Current:	Trade Secret No <input checked="" type="checkbox"/>	Pure Yes <input checked="" type="checkbox"/>	Mix Yes <input checked="" type="checkbox"/>	Solid No <input checked="" type="checkbox"/>	Liquid Yes <input checked="" type="checkbox"/>	Gas No <input checked="" type="checkbox"/>	EHS Yes <input checked="" type="checkbox"/>	7664939
	Change to:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

☐ Check here to delete this chemical

Chemical name: SULFURIC ACID

EHS Name SULFURIC ACID

Physical and Health Hazards

Current:	Fire No <input checked="" type="checkbox"/>	Pressure No <input checked="" type="checkbox"/>	Reactivity Yes <input checked="" type="checkbox"/>	Immediate Yes <input checked="" type="checkbox"/>	Delayed No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
05	05	365	153,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont:	Pres.:	Temp.:	Storage locations	Change location to (do not exceed space provided):	Confidential:
A <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	SULFURIC ACID TANK BACK SIDE OF MILL HAS SECONDARY CONTAINMENT 55 GAL	<input type="text"/>	<input type="checkbox"/>
D <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	AREA BLDG 39 ALUM STORAGE TANK BLDG 3 BLDG #24 HAS BULK STORAGE	<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="text"/>	<input type="checkbox"/>

Chemical Description

Cas Number 007782-50-5	Current:	Trade Secret No <input checked="" type="checkbox"/>	Pure Yes <input checked="" type="checkbox"/>	Mix No <input checked="" type="checkbox"/>	Solid No <input checked="" type="checkbox"/>	Liquid Yes <input checked="" type="checkbox"/>	Gas Yes <input checked="" type="checkbox"/>	EHS Yes <input checked="" type="checkbox"/>	7782505
	Change to:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	

☐ Check here to delete this chemical

Chemical name: CHLORINE

EHS Name CHLORINE

Physical and Health Hazards

Current:	Fire No <input checked="" type="checkbox"/>	Pressure Yes <input checked="" type="checkbox"/>	Reactivity Yes <input checked="" type="checkbox"/>	Immediate Yes <input checked="" type="checkbox"/>	Delayed No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
06	05	365	1,350,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.:	Pres.:	Temp.:	Storage locations	Change location to (do not exceed space provided):	Confidential:
Q <input type="checkbox"/>	2 <input type="checkbox"/>	4 <input type="checkbox"/>	RAIL YARD CHLORINE	<input type="text"/>	<input type="checkbox"/>
L <input type="checkbox"/>	2 <input type="checkbox"/>	4 <input type="checkbox"/>	UNLOADING AREA ONE TON CYLINDERS AT WASTEWATER PLANT	<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="text"/>	<input type="checkbox"/>

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-99) Wis. State 166.20

For use in reporting chemicals present during 1999. (DUE MARCH 1, 2000)

Page 3

Facility Location:
Name: **WAUSAU-MOSINEE PAPER CORPORATION**

Owner/Operator:
Name: **WAUSAU-MOSINEE PAPER CORPORATION**

WEM/SERB Facility ID: 12637
001263-7

Chemical Description

Gas Number 000766-43-8 Trade Secret No ☒ Pure No ☒ Mix Yes ☒ Solid No ☒ Liquid Yes ☒ Gas No ☒ EHS No ☒ 766438

Change to Yes ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ Yes ☐ Yes ☐

☐ Check here to delete this chemical

Chemical name: PHOSPHORIC ACID

EHS Name (none)

Physical and Health Hazards

Current: Fire No ☒ Pressure No ☒ Reactivity Yes ☒ Immediate Yes ☒ Delayed No ☒

Change to Yes ☐ Yes ☐ No ☐ No ☐ Yes ☐

Inventory (See instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	04	365	46,501 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="text"/> gallons

Storage Codes and Locations (See instructions)

Cont.: Pres.: Temp.: Storage locations
C ☐ 1 ☐ 4 ☐ TANK AT WASTEWATER TREATMENT PLANT

Change location to (do not exceed space provided): Confidential: ☐

Chemical Description

Gas Number 007681-52-9 Trade Secret No ☒ Pure No ☒ Mix Yes ☒ Solid No ☒ Liquid Yes ☒ Gas No ☒ EHS No ☒ 7681529

Change to Yes ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ Yes ☐ Yes ☐

☐ Check here to delete this chemical

Chemical name: SODIUM HYPOCHLORITE

EHS Name (none)

Physical and Health Hazards

Current: Fire No ☒ Pressure No ☒ Reactivity Yes ☒ Immediate Yes ☒ Delayed No ☒

Change to Yes ☐ Yes ☐ No ☐ No ☐ Yes ☐

Inventory (See instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	04	365	45,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="text"/> gallons

Storage Codes and Locations (See instructions)

Cont.: Pres.: Temp.: Storage locations
C ☐ 1 ☐ 4 ☐ THE TANKS IN BLDG 14

Change location to (do not exceed space provided): Confidential: ☐

WISCONSIN Tier Two Emergency and Hazardous Chemical Inventory

DMA 1005 (R12-99) Wis State 166 20

For use in rep

chemicals present during 1999. (DUE M CH 1, 2000)

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Facility Location:

 Name: **WAUSAU-MOSINEE PAPER CORPORATION**

Owner/Operator

 Name: **WAUSAU-MOSINEE PAPER CORPORATION**

WEM/SERB Facility ID

12637

001263-7

Chemical Description

Gas Number

001310-73-2

Current:

Trade Secret

 No ☒

Pure

 No ☒

Mix

 Yes ☒

Solid

 No ☒

Liquid

 Yes ☒

Gas

 No ☒

EHS

 No ☒

1310732

Change to:

 Yes ☐

 Yes ☐

 No ☐

 Yes ☐

 No ☐

 Yes ☐

 Yes ☐
☐ Check here to delete this chemical

Chemical name: SODIUM HYDROXIDE

EHS Name (none)

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current:	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg Daily Amount	No. of Days on site	Actual Maximum Amount
05	04	365	189,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.	Pres.	Temp.	Storage locations
D <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	TANK IN BLDG 26 2ND FLOOR
A <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	BLDG #24
C <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	STORAGE AREA 5% CAUSTIC
A <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	TANK MAIN ENTRANCE CHEM
Q <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	RAIL YARK 50% CAUSTIC
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Change location to (do not exceed space provided): Confidential:

Chemical Description

Gas Number

007704-34-9

Current:

Trade Secret

 No ☒

Pure

 Yes ☒

Mix

 No ☒

Solid

 Yes ☒

Liquid

 Yes ☒

Gas

 No ☒

EHS

 No ☒

7704349

Change to:

 Yes ☐

 No ☐

 Yes ☐

 No ☐

 No ☐

 Yes ☐

 Yes ☐
☐ Check here to delete this chemical

Chemical name: SULFUR

EHS Name (none)

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current:	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to:	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg Daily Amount	No. of Days on site	Actual Maximum Amount
06	05	365	1,300,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.: Pres.: Temp.: Storage locations

Change location to (do not exceed space provided):

Confidential:

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-99) Wis. State 166.20

For use in reporting chemicals present during 1999. (DUE MARCH 1, 2000)

Page 5

Facility Location:

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

Q ☐ 1 ☐ 4 ☐ RAIL CARS
A ☐ 1 ☐ 5 ☐ OUTSIDE STORAGE TANK
☐ ☐ ☐

Owner/Operator:

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

WEM/SERB Facility ID:

12637

001263-7

Chemical Description

Cas Number	Trade Secret	Pure	Mix	Solid	Liquid	Gas	EHS	130578
000130-57-8	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	
<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	Current: Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	<input type="checkbox"/> Check here to delete this chemical

Chemical name: **CALCIUM OXIDE**

EHS Name **(none)**

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
05	04	365	102,000 pounds
<div style="border: 1px solid black; width: 40px; height: 20px;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div> <input type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp Storage locations
H ☐ 1 ☐ 4 ☐ OUTSIDE STORAGE SILO
☐ ☐ ☐

Change location to (do not exceed space provided): Confidential:

Chemical Description

Cas Number	Trade Secret	Pure	Mix	Solid	Liquid	Gas	EHS	778244
000778-24-4	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	
<div style="border: 1px solid black; width: 80px; height: 20px;"></div>	Current: Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	<input type="checkbox"/> Check here to delete this chemical

Chemical name: **OXYGEN**

EHS Name **(none)**

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
05	04	365	110,000 pounds
<div style="border: 1px solid black; width: 40px; height: 20px;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div> <input type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp Storage locations
A ☐ 2 ☐ 7 ☐ OUTSIDE STORAGE TANK

Change location to (do not exceed space provided): Confidential:

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-99) Wis State 166.20

For use in reports

chemicals present during 1999. (DUE 1 CH 1, 2000)

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Facility Location:

 Name: **WAUSAU-MOSINEE PAPER CORPORATION**

Owner/Operator

 Name **WAUSAU-MOSINEE PAPER CORPORATION**

WEM/SERB Facility ID

12637

001263-7

Chemical Description

 Gas Number
(please enter)

Current:

Trade Secret

 No ☒

Pure

 No ☒

Mix

 Yes ☒

Solid

 No ☒

Liquid

 Yes ☒

Gas

 No ☒

EHS

 No ☒

Change to:

 Yes ☐

 Yes ☐

 No ☐

 Yes ☐

 No ☐

 Yes ☐

 Yes ☐
☐ Check here to delete this chemical

Chemical name: #2 FUEL OIL

EHS Name (none)

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current:	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>
Change to	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Inventory (See instructions)

Max.Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
06	06	365	2,368,780 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.: Pres.: Temp.: Storage locations

 A ☐ 1 ☐ 4 ☐ NEXT TO BLDG 24

Change location to (do not exceed space provided)

Confidential:

Chemical Description

 Gas Number
(please enter)

Current:

Trade Secret

 No ☒

Pure

 No ☒

Mix

 Yes ☒

Solid

 No ☒

Liquid

 Yes ☒

Gas

 No ☒

EHS

 No ☒

Change to:

 Yes ☐

 Yes ☐

 No ☐

 Yes ☐

 No ☐

 Yes ☐

 Yes ☐
☐ Check here to delete this chemical

Chemical name: FASTUSOL YELLOW 66 L

EHS Name (none)

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current:	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg Daily Amount	No. of Days on site	Actual Maximum Amount
04	04	365	39,500 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.: Pres.: Temp.: Storage locations

 C ☐ 1 ☐ 4 ☐ BUILDING #46 BULK DYE STORAGE

Change location to (do not exceed space provided):

Confidential:

WISCONSIN TIER TWO EMEF AGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-99) Wis. State 166.20

For use in reporting chemicals present during 1999. (DUE MARCH 1, 2000)

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Facility Location:
Name: **WAUSAU-MOSINEE PAPER CORPORATION**

Owner/Operator:
Name: **WAUSAU-MOSINEE PAPER CORPORATION**

WEM/SERB Facility ID: 12637
001263-7

Chemical Description

Cas Number (please enter)		Trade Secret	Pure	Mix	Solid	Liquid	Gas	EHS
	Current	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
	Change to	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

☐ Check here to delete this chemical

Chemical name: FASTUSOL BLUE 79 L

EHS Name (none)

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current.	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	04	365	84,500 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont. Pres Temp Storage locations

C ☐ 1 ☐ 4 ☐ BUILDING #46 BULK DYE STORAGE

☐ ☐ ☐

Change location to (do not exceed space provided):

Confidential: ☐

Chemical Description

Cas Number (please enter)		Trade Secret	Pure	Mix	Solid	Liquid	Gas	EHS
	Current.	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
	Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

☐ Check here to delete this chemical

Chemical name: PONTAMINE YELLOW EM LIQUID

EHS Name (none)

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	04	365	39,500 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont. Pres Temp Storage locations

C ☐ 1 ☐ 4 ☐ BUILDING #46 BULK DYE STORAGE

☐ ☐ ☐

Change location to (do not exceed space provided):

Confidential: ☐

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

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Facility Location:

Name: WAUSAU-MOSINEE PAPER CORPORATION

Owner/Operator

Name: WAUSAU-MOSINEE PAPER CORPORATION

WEM/SERB Facility ID:

12637

001263-7

Chemical Description

 Gas Number
(please enter)

Current:

Trade Secret

 No ☒

Pure

 No ☒

Mix

 Yes ☒

Solid

 No ☒

Liquid

 Yes ☒

Gas

 No ☒

EHS

 No ☒

Change to:

 Yes ☐

 Yes ☐

 No ☐

 Yes ☐

 No ☐

 Yes ☐

 Yes ☐
☐ Check here to delete this chemical

Chemical name: NALCO 7659

EHS Name (none)

Physical and Health Hazards

Fire

 No ☒

Pressure

 No ☒

Reactivity

 No ☒

Immediate

~~No~~ ☒

Delayed

 Yes ☒

Current:

Change to:

 Yes ☐

 Yes ☐

 Yes ☐

 Yes ☒

 No ☐

Inventory (See instructions)

 Max. Daily
Amount

04

 Avg. Daily
Amount

04

 No. of Days
on site

365

 Actual Maximum
Amount

~~54,000~~ pounds

 48,800 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont.: Pres.: Temp.: Storage locations

 C ☐ 1 ☐ 4 ☐ NW CORNER OF BUILDING 35

Change location to (do not exceed space provided):

Confidential

☐
☐

Chemical Description

 Gas Number
(please enter)

Current:

Trade Secret

 No ☒

Pure

 No ☒

Mix

 Yes ☒

Solid

 No ☒

Liquid

 Yes ☒

Gas

 No ☒

EHS

 No ☒

Change to:

 Yes ☐

 Yes ☐

 No ☐

 Yes ☐

 No ☐

 Yes ☐

 Yes ☐
☐ Check here to delete this chemical

Chemical name: NALCLEAR 8182

EHS Name (none)

Physical and Health Hazards

Fire

 No ☒

Pressure

 No ☒

Reactivity

 No ☒

Immediate

 Yes ☒

Delayed

 No ☒

Current:

Change to:

 Yes ☐

 Yes ☐

 Yes ☐

 No ☐

 Yes ☐

Inventory (See instructions)

 Max. Daily
Amount

04

 Avg. Daily
Amount

03

 No. of Days
on site

365

 Actual Maximum
Amount

~~18,500~~ pounds

 20,750 ☒ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont.: Pres.: Temp.: Storage locations

 C ☐ 1 ☐ 4 ☐ NE CORNER BUILDING 45B

Change location to (do not exceed space provided):

Confidential

☐
☐

WISCONSIN TIER TWO EMEF AGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-99) Wis. State 166.20

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Facility Location:

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

Owner/Operator:

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

WEM/SERB Facility ID:

001263-7

12637

Chemical Description

Gas Number (please enter)	Current:	Trade Secret	Pure	Mix	Solid	Liquid	Gas	EHS
<input type="text"/>	Change to	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
		Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

☐ Check here to delete this chemical

Chemical name: **NALCO 7530**

EHS Name **(none)**

Physical and Health Hazards

Current:	Fire	Pressure	Reactivity	Immediate	Delayed
	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	04	365	20,900 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	48,750 <input checked="" type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont. Pres.: Temp. Storage locations

0 ☐ 1 ☐ 4 ☐ BUILDING 12 CHEMICAL STORAGE AREA

☐ ☐ ☐

Change location to (do not exceed space provided): Confidential:

Chemical Description

Gas Number (please enter)	Current:	Trade Secret	Pure	Mix	Solid	Liquid	Gas	EHS
<input type="text"/>	Change to:	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
		Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

☐ Check here to delete this chemical

Chemical name: **NALCO 8623 PLUS**

EHS Name **(none)**

Physical and Health Hazards

Current:	Fire	Pressure	Reactivity	Immediate	Delayed
	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	03	365	42,400 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	8,600 <input checked="" type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont. Pres.: Temp. Storage locations

0 ☐ 1 ☐ 4 ☐ BUILDING 44

0 ☐ 1 ☐ 4 ☐ BUILDING 12 CHEMICAL STORAGE AREA

☐ ☐ ☐

Change location to (do not exceed space provided): Confidential:

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-99) Wis. State 166.20

For use in reports chemicals present during 1999. (DUE 12/31/2000)

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Facility Location:

Owner/Operator:

WEM/SERB Facility ID:

12637

Name: WAUSAU-MOSINEE PAPER CORPORATION

Name: WAUSAU-MOSINEE PAPER CORPORATION

001263-7

Chemical Description

Gas Number (please enter)	Current:	Trade Secret No <input checked="" type="checkbox"/>	Pure No <input checked="" type="checkbox"/>	Mix Yes <input checked="" type="checkbox"/>	Solid No <input checked="" type="checkbox"/>	Liquid Yes <input checked="" type="checkbox"/>	Gas No <input checked="" type="checkbox"/>	EHS No <input checked="" type="checkbox"/>
<input type="text"/>	Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

☐ Check here to delete this chemical

Chemical name: NALCO 8669 ANTIFOAM

EHS Name (none)

Physical and Health Hazards

Fire	Pressure	Reactivity	Immediate	Delayed
No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	03	365	15,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.	Pres.	Temp.	Storage locations
0 <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	BASEMENT BUILDING 39
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Change location to (do not exceed space provided): Confidential:

<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>

Chemical Description

Gas Number (please enter)	Current:	Trade Secret No <input checked="" type="checkbox"/>	Pure No <input checked="" type="checkbox"/>	Mix Yes <input checked="" type="checkbox"/>	Solid No <input checked="" type="checkbox"/>	Liquid Yes <input checked="" type="checkbox"/>	Gas No <input checked="" type="checkbox"/>	EHS No <input checked="" type="checkbox"/>
<input type="text"/>	Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

☐ Check here to delete this chemical

Chemical name: NALCON 7647

EHS Name (none)

Physical and Health Hazards

Fire	Pressure	Reactivity	Immediate	Delayed
No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg Daily Amount	No. of Days on site	Actual Maximum Amount
04	03	365	10,200 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	26,330 <input checked="" type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.	Pres.	Temp.	Storage locations
0 <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	BUILDING 12 CHEMICAL STORAGE AREA
0 <input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	BUILDING 3
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Change location to (do not exceed space provided): Confidential:

<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-99) Wis. State 166.20

For use in reporting chemicals present during 1999. (DUE MARCH 1, 2000)

Page 11

Facility Location:

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

Owner/Operator:

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

WEM/SERB Facility ID.

12637

001263-7

Chemical Description

Gas Number
(please enter)

Current:

Trade Secret
No ☒

Pure
No ☒

Mix
Yes ☒

Solid
No ☒

Liquid
Yes ☒

Gas
No ☒

EHS
No ☒

Change to:

Yes ☐

Yes ☐

No ☐

Yes ☐

No ☐

Yes ☐

Yes ☐

☐ Check here to delete this chemical

Chemical name: NALKEEN 2607

EHS Name (none)

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current:	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	03	365	12,650 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.: Pres.: Temp.: Storage locations

0 ☐ 1 ☐ 4 ☐ BUILDING 34A CHEMICAL STORAGE AREA

Change location to (do not exceed space provided):

Confidential:

Chemical Description

Gas Number
(please enter)

Current:

Trade Secret
No ☒

Pure
No ☒

Mix
Yes ☒

Solid
No ☒

Liquid
Yes ☒

Gas
No ☒

EHS
No ☒

Change to:

Yes ☐

Yes ☐

No ☐

Yes ☐

No ☐

Yes ☐

Yes ☐

☒ Check here to delete this chemical

Chemical name: NALKLEEN 2642

EHS Name (none)

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current:	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	03	365	11,800 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.: Pres.: Temp.: Storage locations

0 ☐ 1 ☐ 4 ☐ BUILDING 34A CHEMICAL STORAGE AREA

Change location to (do not exceed space provided):

Confidential:

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-99) Wis. State 166.20

For use in reporting chemicals present during 1999. (DUE 12/31/2000)

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Facility Location:

Owner/Operator:

WEM/SERB Facility ID.

12637

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

001263-7

Chemical Description

Cas Number (please enter)	Current:	Trade Secret	Pure	Mix	Solid	Liquid	Gas	EHS
<input type="text"/>		No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
	Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

☐ Check here to delete this chemical

Chemical name: NALSTRIP 12

EHS Name (none)

Physical and Health Hazards

Fire	Pressure	Reactivity	Immediate	Delayed
Current: No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to: Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg Daily Amount	No. of Days on site	Actual Maximum Amount
04	03	365	10,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	18,000 <input checked="" type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.: Pres.: Temp.: Storage locations

O ☐ 1 ☐ 4 ☐ BUILDING 34A CHEMICAL STORAGE AREA

☐ ☐ ☐

Change location to (do not exceed space provided):

Confidential:

Chemical Description

Cas Number (please enter)	Current:	Trade Secret	Pure	Mix	Solid	Liquid	Gas	EHS
<input type="text"/>		No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
	Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

☐ Check here to delete this chemical

Chemical name: NALSTRIP 2601

EHS Name (none)

Physical and Health Hazards

Fire	Pressure	Reactivity	Immediate	Delayed
Current: No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to: Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg Daily Amount	No. of Days on site	Actual Maximum Amount
04	04	365	50,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	68,300 <input checked="" type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.: Pres.: Temp.: Storage locations

O ☐ 1 ☐ 4 ☐ BUILDING 34A CHEMICAL STORAGE AREA

E ☐ 1 ☐ 4 ☐ BUILDING 34A CHEMICAL STORAGE AREA

☐ ☐ ☐

Change location to (do not exceed space provided):

Confidential:

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-99) Wis. State 166.20

For use in reporting chemicals present during 1999. (DUE MARCH 1, 2000)

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Facility Location:
Name: **WAUSAU-MOSINEE PAPER CORPORATION**

Owner/Operator:
Name: **WAUSAU-MOSINEE PAPER CORPORATION**

WEM/SERB Facility ID: 12637
001263-7

Chemical Description

Gas Number (please enter)		Trade Secret	Pure	Mix	Solid	Liquid	Gas	EHS
	Current.	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
	Change to	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

☐ Check here to delete this chemical

Chemical name: NALSTRIP 7581

EHS Name (none)

Physical and Health Hazards

Fire	Pressure	Reactivity	Immediate	Delayed
Current: No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to: Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	03	365	13,900 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp Storage locations

0 ☐ 1 ☐ 4 ☐ BUILDING 12 CHEMICAL STORAGE AREA

Change location to (do not exceed space provided): Confidential

Chemical Description

Gas Number (please enter)		Trade Secret	Pure	Mix	Solid	Liquid	Gas	EHS
	Current:	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
	Change to	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

☐ Check here to delete this chemical

Chemical name: POSITEK 8671

EHS Name (none)

Physical and Health Hazards

Fire	Pressure	Reactivity	Immediate	Delayed
Current: No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>
Change to: Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>

Inventory (See instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	04	365	35,350 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	21,200 <input checked="" type="checkbox"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont Pres Temp Storage locations

0 ☐ 1 ☐ 4 ☐ BASEMENT BUILDING 29

0 ☐ 1 ☐ 4 ☐ BASEMENT BUILDING 3

Change location to (do not exceed space provided): Confidential

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-99) Wis. State 166.20

For use in reporting chemicals present during 1999. (DUE 1 CH 1, 2000)

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Facility Location:

Owner/Operator:

WEM/SERB Facility ID.

12637

 Name: **WAUSAU-MOSINEE PAPER CORPORATION**

 Name: **WAUSAU-MOSINEE PAPER CORPORATION**

001263-7

Chemical Description

Cas Number

(please enter)

Current:

Trade Secret

 No ☒

Pure

 No ☒

Mix

 Yes ☒

Solid

 No ☒

Liquid

 Yes ☒

Gas

 No ☒

EHS

 No ☒

Change to:

 Yes ☐

 Yes ☐

 No ☐

 Yes ☐

 No ☐

 Yes ☐

 Yes ☐
☐ Check here to delete this chemical

 Chemical name: **CARTASOL TURQUOISE K-RL**

 EHS Name **(none)**

Physical and Health Hazards

Fire

 No ☒

Pressure

 No ☒

Reactivity

 No ☒

Immediate

 Yes ☒

Delayed

 Yes ☒

Current:

Change to:

 Yes ☐

 Yes ☐

 Yes ☐

 No ☐

 No ☐

Inventory (See instructions)

 Max.Daily
Amount

04

 Avg. Daily
Amount

03

 No. of Days
on site

365

 Actual Maximum
Amount

12,000 pounds

☐ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont.. Pres.: Temp.: Storage locations

 0 ☐

 1 ☐

 4 ☐

BUILDING 39 DYE STORAGE AREA

Change location to (do not exceed space provided):

Confidential.

☐
☐
☐

Chemical Description

Cas Number

(please enter)

Current:

Trade Secret

 No ☒

Pure

 No ☒

Mix

 Yes ☒

Solid

 No ☒

Liquid

 Yes ☒

Gas

 No ☒

EHS

 No ☒

Change to:

 Yes ☐

 Yes ☐

 No ☐

 Yes ☐

 No ☐

 Yes ☐

 Yes ☐
☐ Check here to delete this chemical

 Chemical name: **INTRABOND BRILLIANT PINK BR**

 EHS Name **(none)**

Physical and Health Hazards

Fire

 No ☒

Pressure

 No ☒

Reactivity

 No ☒

Immediate

 Yes ☒

Delayed

 No ☒

Current:

Change to:

 Yes ☐

 Yes ☐

 Yes ☐

 No ☐

 Yes ☐

Inventory (See instructions)

 Max.Daily
Amount

04

 Avg. Daily
Amount

03

 No. of Days
on site

365

 Actual Maximum
Amount

15,900 pounds

☐ pounds ☐ gallons

Storage Codes and Locations (See instructions)

Cont.. Pres.: Temp.: Storage locations

 0 ☐

 1 ☐

 4 ☐

BUILDING 39 DYE STORAGE AREA

Change location to (do not exceed space provided):

Confidential.

☐
☐
☐

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-99) Wis. State 166.20

For use in reporting chemicals present during 1999. (DUE MARCH 1, 2000)

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Facility Location:
Name: **WAUSAU-MOSINEE PAPER CORPORATION**

Owner/Operator:
Name: **WAUSAU-MOSINEE PAPER CORPORATION**

WEM/SERB Facility ID: 12637
001263-7

Chemical Description

Cas Number (please enter)	Current:	Trade Secret No <input checked="" type="checkbox"/>	Pure No <input checked="" type="checkbox"/>	Mix Yes <input checked="" type="checkbox"/>	Solid No <input checked="" type="checkbox"/>	Liquid Yes <input checked="" type="checkbox"/>	Gas No <input checked="" type="checkbox"/>	EHS No <input checked="" type="checkbox"/>
<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

☐ Check here to delete this chemical

Chemical name: **PERGASOL YELLOW F - 6 GL**

EHS Name **(none)**

Physical and Health Hazards

Current:	Fire No <input checked="" type="checkbox"/>	Pressure No <input checked="" type="checkbox"/>	Reactivity No <input checked="" type="checkbox"/>	Immediate Yes <input checked="" type="checkbox"/>	Delayed No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	03	365	11,000 pounds
<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont. Pres.: Temp.: Storage locations
 O ☐ 1 ☐ 4 ☐ BUILDING 39 DYE STORAGE AREA
☐ ☐ ☐

Change location to (do not exceed space provided): Confidential.

Chemical Description

Cas Number (please enter)	Current:	Trade Secret No <input checked="" type="checkbox"/>	Pure No <input checked="" type="checkbox"/>	Mix Yes <input checked="" type="checkbox"/>	Solid No <input checked="" type="checkbox"/>	Liquid Yes <input checked="" type="checkbox"/>	Gas No <input checked="" type="checkbox"/>	EHS No <input checked="" type="checkbox"/>
<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

☐ Check here to delete this chemical

Chemical name: **PERGASOL YELLOW 3G**

EHS Name **(none)**

Physical and Health Hazards

Current:	Fire No <input checked="" type="checkbox"/>	Pressure No <input checked="" type="checkbox"/>	Reactivity No <input checked="" type="checkbox"/>	Immediate Yes <input checked="" type="checkbox"/>	Delayed No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	04	365	98,500 pounds
<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont. Pres.: Temp.: Storage locations
 O ☐ 1 ☐ 4 ☐ BUILDING 39 DYE STORAGE AREA
☐ ☐ ☐

Change location to (do not exceed space provided): Confidential.

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-99) Wis State 166.20

For use in reporting chemicals present during 1999. (DUE March 1, 2000)

Page 16

Facility Location:

Owner/Operator:

WEM/SERB Facility ID 12637

Name: WAUSAU-MOSINEE PAPER CORPORATION

Name: WAUSAU-MOSINEE PAPER CORPORATION

001263-7

Chemical Description

Gas Number (please enter)	Current:	Trade Secret No <input checked="" type="checkbox"/>	Pure No <input checked="" type="checkbox"/>	Mix Yes <input checked="" type="checkbox"/>	Solid No <input checked="" type="checkbox"/>	Liquid Yes <input checked="" type="checkbox"/>	Gas No <input checked="" type="checkbox"/>	EHS No <input checked="" type="checkbox"/>
<input type="text"/>	Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

☐ Check here to delete this chemical

Chemical name: PONTAMINE BRILLIANT BOND BLUE A

EHS Name (none)

Physical and Health Hazards

	Fire No <input checked="" type="checkbox"/>	Pressure No <input checked="" type="checkbox"/>	Reactivity No <input checked="" type="checkbox"/>	Immediate Yes <input checked="" type="checkbox"/>	Delayed No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg Daily Amount	No. of Days on site	Actual Maximum Amount
04	04	365	01,500 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input checked="" type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.	Pres.	Temp.	Storage locations
<input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	BUILDING 39 DYE STORAGE AREA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Change location to (do not exceed space provided): Confidential

Chemical Description

Gas Number (please enter)	Current:	Trade Secret No <input checked="" type="checkbox"/>	Pure No <input checked="" type="checkbox"/>	Mix Yes <input checked="" type="checkbox"/>	Solid No <input checked="" type="checkbox"/>	Liquid Yes <input checked="" type="checkbox"/>	Gas No <input checked="" type="checkbox"/>	EHS No <input checked="" type="checkbox"/>
<input type="text"/>	Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

☐ Check here to delete this chemical

Chemical name: CASCO RESIN PR - 335 CU

EHS Name (none)

Physical and Health Hazards

	Fire No <input checked="" type="checkbox"/>	Pressure No <input checked="" type="checkbox"/>	Reactivity No <input checked="" type="checkbox"/>	Immediate Yes <input checked="" type="checkbox"/>	Delayed Yes <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>

Inventory (See instructions)

Max Daily Amount	Avg Daily Amount	No. of Days on site	Actual Maximum Amount
04	03	365	13,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.	Pres.	Temp.	Storage locations
<input type="checkbox"/>	1 <input type="checkbox"/>	4 <input type="checkbox"/>	BUILDING 34A CHEMICAL STORAGE AREA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Change location to (do not exceed space provided): Confidential

WISCONSIN TIER TWO EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY

DMA 1005 (R12-99) Wis. State 166.20

For use in reporting chemicals present during 1999. (DUE MARCH 1, 2000)

Page 17

Facility Location:

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

Owner/Operator:

Name: **WAUSAU-MOSINEE PAPER CORPORATION**

WEM/SERB Facility ID:

12637

001263-7

Chemical Description

Cas Number

007722-84-1

Current:

Trade Secret

No ☒

Pure

No ☒

Mix

Yes ☒

Solid

No ☒

Liquid

Yes ☒

Gas

No ☒

EHS

No ☒

7722841

Change to

Yes ☐

Yes ☐

No ☐

Yes ☐

No ☐

Yes ☐

Yes ☐

☐ Check here to delete this chemical

Chemical name: HYDROGEN PEROXIDE 50% SOLN

EHS Name (none)

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
04	04	365	42,600 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.. Pres.. Temp.. Storage locations
A ☐ 1 ☐ 4 ☐ SE OF BUILDING 49
☐ ☐ ☐

Change location to (do not exceed space provided): Confidential:
 ☐
 ☐

Chemical Description

Cas Number

001309-42-8

Current:

Trade Secret

No ☒

Pure

No ☒

Mix

Yes ☒

Solid

No ☒

Liquid

Yes ☒

Gas

No ☒

EHS

No ☒

01309428

Change to

Yes ☐

Yes ☐

No ☐

Yes ☐

No ☐

Yes ☐

Yes ☐

☐ Check here to delete this chemical

Chemical name: MAGNESIUM HYDROXIDE

EHS Name (none)

Physical and Health Hazards

	Fire	Pressure	Reactivity	Immediate	Delayed
Current	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
Change to:	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Inventory (See instructions)

Max. Daily Amount	Avg. Daily Amount	No. of Days on site	Actual Maximum Amount
06	05	365	1,800,000 pounds
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> pounds <input type="checkbox"/> gallons

Storage Codes and Locations (See instructions)

Cont.: Pres.: Temp.: Storage locations
Q ☐ 1 ☐ 4 ☐ RAIL YARD
A ☐ 1 ☐ 4 ☐ ADJACENT TO BUILDING 44A
A ☐ 1 ☐ 4 ☐ ADJACENT TO BUILDING 44A
☐ ☐ ☐

Change location to (do not exceed space provided): Confidential:
 ☐
 ☐
 ☐
 ☐

Continuation page for reporting additional Chemicals

DMA 1005 (R12-99) Wis State 166 20

For use in repo

chemicals present during 1999. (DUE M. H 1, 2000)

Page _____

Facility Location:

Owner/Operator:

WEM/SERB Facility ID.

12637

Name: WAUSAU-MOSINEE PAPER CORPORATION

Name: WAUSAU-MOSINEE PAPER CORPORATION

001263-7

Chemical Description

Cas Number

Trade Secret

Pure

Mix

Solid

Liquid

Gas

EHS

Yes ☐Yes ☐Yes ☐Yes ☐Yes ☐Yes ☐Yes ☐No ☐No ☐No ☐No ☐No ☐No ☐No ☐☐ Check here to delete this chemical

Chemical name:

EHS Name

Physical and Health Hazards

Fire

Pressure

Reactivity

Immediate

Delayed

Yes ☐Yes ☐Yes ☐Yes ☐Yes ☐No ☐No ☐No ☐No ☐No ☐**Inventory (See instructions)**Max Daily
AmountAvg Daily
AmountNo of Days
on siteActual Maximum
Amount pounds ☐ gallons**Storage Codes and Locations (See instructions)**

Cont

Pres

Temp

Storage locations

Confidential.

☐☐☐☐☐☐**Chemical Description**

Cas Number

Trade Secret

Pure

Mix

Solid

Liquid

Gas

EHS

Yes ☐Yes ☐Yes ☐Yes ☐Yes ☐Yes ☐Yes ☐No ☐No ☐No ☐No ☐No ☐No ☐No ☐☐ Check here to delete this chemical

Chemical name:

EHS Name

Physical and Health Hazards

Fire

Pressure

Reactivity

Immediate

Delayed

Yes ☐Yes ☐Yes ☐Yes ☐Yes ☐No ☐No ☐No ☐No ☐No ☐**Inventory (See instructions)**Max Daily
AmountAvg Daily
AmountNo of Days
on siteActual Maximum
Amount pounds ☐ gallons**Storage Codes and Locations (See instructions)**

Cont

Pres

Temp.

Storage locations

Confidential.

☐☐☐☐☐☐☐☐☐

